

# QUEENS UNIVERSITY *of* CHARLOTTE

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## Registration Exception Form

TERM \_\_\_\_\_ YEAR \_\_\_\_\_

\_\_\_\_\_

Last
First
Middle
Queens ID Number ( Required )  
( this is not your Social Security Number )

Cell Number: \_\_\_\_\_

**EXCEPTION REQUESTED**

**SIGNATURE(S) REQUIRED**

- PN = Pass/No Record ..... Advisor
- AU = Audit ..... Advisor
- OL = Overload Waiver ..... Advisor
- RE = Repeated Class ..... Advisor
- CC = Conflicting Courses Waiver ..... Advisor and Instructors
- PRW= Prerequisite Waiver ..... Advisor and Department Chair

**IF THERE ARE MULTIPLE EXCEPTIONS FOR A COURSE, PLEASE INDICATE ALL OF THEM  
AND BE SURE TO OBTAIN PROPER SIGNATURES FOR EACH EXCEPTION.**

TYPE OF EXCEPTION REQUESTED <small>(see list above)</small>	Course: Department, number and section number  <small>( Example: QEN 101 001 )</small>	CR Hrs	Grade Type	Course Title	SIGNATURE(S) REQUIRED <small>(based on type of exception requested -see list above)</small>
					Advisor: _____ Dept Chair: _____ Dean: _____ Instructor: _____
					Advisor: _____ Dept Chair: _____ Dean: _____ Instructor: _____
					Advisor: _____ Dept Chair: _____ Dean: _____ Instructor: _____

*Any reduction in total credits may affect billing, financial aid, graduation, on-campus housing, and athletic eligibility. An overload tuition fee will be billed per credit over 20.0 credits for undergraduate students. Please refer to the Student Financial Services webpages for further information.*

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_