



Computer Science and Information Technology Department

Request for Course Waitlist

Student: Complete the top part of the form, sign to complete this form.

Student Name: _____ ID: _____

KU Email: _____

Course Information

Semester: _____ Year: _____

Course Number: CSC _____ Course Instructor: _____

Preferred Section Number: _____ Preferred Class Number: _____

Reason you cannot enroll:

Reason this course is needed:

If adding this course will put you over 18 credits or cause a time conflict, please indicate the appropriate course to drop from your schedule to avoid these issues.

Course prefix and Num: _____ Class Num: _____

Signature of student _____ Date _____

Received by department

Department Name: _____ Signature: _____ Date: _____

Department Notes:

Department signature indicates receipt of form. Submission of this information does not guarantee you enrollment in the course. You will be contacted by the department chair or secretary after your request has been processed. Requests will be processed on a FIFO order system.