

10 DIGIT # USUALLY BEGINS WITH A 20



REGISTRATION, ADD, DROP & WITHDRAWAL FORM

This form must be returned to the Registrar's Office to ensure processing. Refer to the online class schedule, www.utdallas.edu, to determine advisor approval. Please print legibly.

Student Name: Last Name _____ First Name _____ MI _____

UTD-ID: _____ Semester: Fall _____ Spring _____ Summer _____

Class Section
 Class Section: HCS 7364-001
 Class Title: Cognitive Neuroscience of Human Memory (3)
 Instructor: Michael Rugg
 Section: 001
 Section Dates: 8-14pm
 CRN: 12412

Class Detail
 Class Section: HCS 7364-001
 Class Title: Cognitive Neuroscience of Human Memory (3)
 Instructor: Michael Rugg
 Section: 001
 Section Dates: 8-14pm
 CRN: 12412

Class Info
 Class Level: Graduate
 Activity Type: Lecture
 Prerequisite: HCS 7363
 Corequisite: HCS 7365
 Credit Hours: 3
 Credit Type: Graduate
 Status: Department Consent Required
 Open Date/Time: 2022-08-17 10:30:00

Station
 Enrollment Status: OPEN Available Seats: 7 Enrolled Total: 0 Waitlist: 0

Description
 HCS 7364 - Cognitive Neuroscience of Human Memory (3 semester credit hours). Section-based class that covers the cognitive neuroscience of human long-term memory. It combines a historical perspective with discussion of current controversies and advances. Prerequisite: BSOC majors only and department consent required. (2022)

Registration/Add/Drop/Withdrawal						
In the first column below, circle the code that corresponds to your enrollment request.						
R=Register/ D=Drop (Circle One)	5-Digit Class Number	Subject Prefix	Course #	Section #	Credit Hours	
<input type="checkbox"/> R <input type="checkbox"/> D	83138	HCS	7364	001	3	
<input type="checkbox"/> R <input type="checkbox"/> D						
<input type="checkbox"/> R <input type="checkbox"/> D		HCS	8V89			
<input type="checkbox"/> R <input type="checkbox"/> D						
<input type="checkbox"/> R <input type="checkbox"/> D						
<input type="checkbox"/> R <input type="checkbox"/> D						
<input type="checkbox"/> R <input type="checkbox"/> D						
<input type="checkbox"/> R <input type="checkbox"/> D						

Withdrawal From UTD. I do not plan on returning to UTD. (WU)

Class Withdrawal Reason

Academic Reasons

Non-Academic Reasons

Undergraduates: If your withdrawal is for any non-academic reason, you must submit a petition to withdraw through the Director of Undergraduate Advising. If you do not submit a petition in a timely manner, your withdrawal will be treated as an academic withdrawal.

Exceptions: Any registration, add or withdrawal attempts made past the deadlines listed in the Academic Calendar must be approved by the School or Associate Dean and the Undergraduate or Graduate Dean.

I understand it is my responsibility to withdraw from courses for which I am registered and do not attend, and it is my responsibility to read and understand the deadlines for refunds and for dropping classes according to the Academic Calendar. I further understand and agree that payment for tuition and fees is due by the published date in the Academic Calendar to avoid cancellation of my classes. I also understand that any refund will be based on the refund schedule set forth in section 54.006 of the Texas Education Code published in the UTD Catalog. Please Note: All withdrawals are subject to the rules and deadlines in the Academic Calendar.

Student: _____ Date: _____ School/Associate Dean: _____ Date: _____

Advisor: _____ Date: _____ Under/Graduate Dean: _____ Date: _____

Attention F-1 and J-1 Students: Withdrawing from courses may have immigration consequences. These include the need to apply for updated immigration documents. Ensure that you understand the potential consequences to your immigration status prior to withdrawing from any courses.

RESEARCH HOURS WILL NOT HAVE A CLASS NUMBER OR SECTION NUMBER. THESE CHANGE FROM SEMESTER TO SEMESTER

MAKE SURE TO FILL OUT:

- FIRST AND LAST NAME
- UTD ID
- SEMESTER YOU ARE REGISTERING
- IF YOU ARE REGISTERING MARK 'R'
- IF YOU ARE DROPPING MARK 'D'
- SIGN
- SEND TO FACULTY ADVISOR FOR SIGNATURE
- WE WILL ACCEPT ADVISORS EMAIL IN LIEU OF SIGNATURE
- SEND TO ASC TO PROCESS

