



DUAL CAMPUS STUDENT REQUEST FORM

Name: \_\_\_\_\_

WVU ID: \_\_\_\_\_ Current Major: \_\_\_\_\_

Local Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

The above named  WVU-Morgantown /  WVU Potomac State College student requests permission to enroll for the following courses at WVU Tech during the:

Fall  Spring  Summer of 20\_\_\_\_ term

Tech Courses

CRN Course Title Course Number Credit Hours Online Course (Y/N)

\_\_\_\_\_  
\_\_\_\_\_

Justification for requesting to take courses through Tech:

\_\_\_\_\_  
\_\_\_\_\_

Student's Signature Date Your Advisor's Signature Date

Return form to: Registrar's Office  
410 Neville Street  
Beckley, WV 25801

(304) 929.1696 (fax)

Please note: Separate tuition and fees will be assessed for courses on each campus.

For Tech office use only:  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Registration override completed by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Disapproved by: \_\_\_\_\_ Date: \_\_\_\_\_