



ENROLLMENT STATUS CHANGE REQUEST

Please check appropriate box below:

- Cancel HSU leave of absence
- Cancel outgoing NSE status
- Cancel outgoing Intra-system Visitor status
- Cancel withdrawal

Name _____ Local Phone # _____

Local Mailing Address _____

Preferred Email Address _____ HSU-ID # _____

Please clearly state for which semester the adjustment is to be made and what changes you would like us to make to your enrollment status:

Signature: _____ Date _____

Please Note: You will be sent registration information via email.