



# Current Student Registration Request COIN Error Received

This form is for current UMass Dartmouth students ONLY who receive an error message when trying to enroll in COIN. Complete this form and email it to your advisor/department chair/graduate program director for approval. Once approved, the form must be submitted to the Student Service Center (SSC) at <https://www.umassd.edu/ssc/> under "Submit an inquiry" to process the registration. You will receive confirmation from SSC when processed. **Note:** Holds must be resolved and the Student Financial Responsibility Agreement must be completed prior to submitting this form.

## Student Information

Last Name                                      First Name                                      Student ID                                      Email Address

Major/Program of Study                                      Semester/Year Enrollment Requested

## Selected Courses

Please select the reason you are unable to self-register in COIN:

- Online course offered through Online and Continuing Education (additional tuition & fee charges may apply)
- Prerequisite/Corequisite Not Completed
- Departmental Consent/Instructor Permission Required
- Undergraduate student seeking enrollment in graduate level course
- Other (please specify reason): \_\_\_\_\_

Course Subject	Course Number	Course Section	Class Number	Instructor Name

### Important notes:

- **Advisor or Department Chairperson or Graduate Program Director and instructor approval is NOT required for day school students seeking course registration in Online & Continuing Education course(s) if it is the only reason you are unable to self-register in COIN.**
- **All other reasons require Advisor, Department Chairperson or Graduate Program Director (as appropriate) AND instructor approval to be processed.**

## Signature and Approvals

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Instructor Name

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisor or Department Chairperson or  
Graduate Program Director Name

\_\_\_\_\_  
Advisor or Department Chairperson or  
Graduate Program Director Signature

\_\_\_\_\_  
Date