

Student Name:	Date:	
Major:	Student ID:	
understand that this applicati	nroll in an on-campus class as an online student at Bluefield University. I on is not an application to the Bluefield University On-Campus Program, o take one on-campus course for this semester.	
Requested Course		
Course Number:	Semester:	
Course Name:	Hours Planned:	
Reason for seeking one Or	n-Campus course registration approval:	
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stipulations: 1. I am aware that this operation one-time flexibility as my need for this one-time. 2. I am aware that I am required to complete the second of the second	Student Taking One Traditional Course Exception, I agree to the following opportunity was granted as a means for Bluefield University to allow for a I make efforts to resolve the significant personal concerns that resulted in time exception. esponsible for ensuring that I have the necessary resources that will be hese courses locally at Bluefield University. Dee considered an Online Student, but will be responsible for the lit hour cost for the class. See academic catalog for more dent enrolled in the online program at Bluefield University I cannot expect olely through traditional methods of instructional delivery. Ot expect to have this opportunity granted to me for more than one	
Required Signatures		
Student:	Date:	
Advisor:	Date:	
VP for Online Education:	Date:	

Registrar	Financial Aid	Student Accounts