



Office of the University Registrar
4400 University Drive, MS 3D1, Fairfax, Virginia 22030
Tel: 703-993-2000 Email: regsites@gmu.edu

SPECIAL REGISTRATION
TO RETAIN ACTIVE STATUS
(ZREG 200)

- Degree-seeking students not enrolled in a credit-bearing course but whose academic department certifies that they are pursuing an activity related to their Mason enrolled program can retain active status by registering for Special Registration (ZREG 200).
• Written approval from the department chair is required. Special registration allows students to retain library and computer privileges, receive a student ID, and buy a parking decal.
• This request requires pre-payment of \$45 and will not be processed until the Student Accounts Office has verified (below) that payment has been made.
• After this request has been processed ZREG 200 will appear on the student's transcript.

Student's G#: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Mason Email: \_\_\_\_\_
Last First M.I.

Student's Program: \_\_\_\_\_ Registration/Graduation Term: \_\_\_\_\_
Semester/Year

Are you planning to graduate this semester? Yes or No

What is your reason for requesting this Special Registration?

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

GRADUATE STUDENTS PLEASE NOTE: This special registration will not suffice for the university continuous enrollment requirement while you are finishing your Thesis or Dissertation. Students working on a Thesis or Dissertation must be enrolled in Thesis (799) or Dissertation (999).

Are you on a F1 or J1 Visa? Yes or No If yes, you must meet with an advisor in the Office of International Programs as your immigration status might be affected.

\_\_\_\_\_
Office of International Programs and Services Date

Student's Signature (Required): \_\_\_\_\_ Date: \_\_\_\_\_

Department Approval: This request, if approved, requires pre-payment of a \$45.00 university services fee. The Registrar's Office cannot process this special registration until this fee has been paid by the student. It is therefore important that the student, upon approval, be notified immediately so they can make arrangements to cover this cost.

\_\_\_\_\_
Chair or Designee Signature Date

\_\_\_\_\_
Student Accounts Representative Date