

Schedule Planning and Registration Form

Please print legibly

Term

(check one): ☐ Maymester ☐ Summer I ☐ Summer II ☐ Fall ☐ Spring 20_____

Name _____ GCID _____ Major _____
Last First Middle

Enrollment Level ☐ New Undergraduate ☐ New Graduate* Phone _____
 (check one) ☐ Returning Undergraduate ☐ Returning Graduate*

*In no instance will more than a total of 12 semester hours from any one designation, or a combination of the Provisional, Enrichment, Certification, or Transient designations, be counted toward a graduate degree program.

PLEASE NOTE

IF THIS REGISTRATION PLACES YOU ON SENIOR STATUS, YOU SHOULD SECURE AN APPLICATION FOR GRADUATION NOW.

Instructions:

1. Meet with your Adviser.
2. Select a preferred schedule and enter course information in the appropriate section.
3. Select alternate courses and enter information in the appropriate section.
4. Present this form at appropriate registration time and site.

PREFERRED SCHEDULE

Note: Student may not register for course without adviser approval.

CRN	Dept. Abbr.	Course Number	Course Section	Hours	Start Time	End Time	Meeting Days (circle)	Bldg./ Room	Is This Audit?	Is This Repeat of D or Better?
							M T W R F			
							M T W R F			
							M T W R F			
							M T W R F			
							M T W R F			
							M T W R F			
							M T W R F			
							M T W R F			

Total Hours

ALTERNATIVE COURSES

							M T W R F			
							M T W R F			
							M T W R F			

Total Hours

Student's Signature _____

Date _____

Faculty Adviser's Signature _____

Date _____

Major Department Chair's approval of overload is required if student is attempting more than 10 hours per 4-week summer term or more than 18 hours for one full term.