ID# _____

New ☐ Program:

Advisor:

Simmons College GSLIS

Term: _____ Year: 20___ Registration

First Name Last Name

Address City State Zip Code

Home Phone Work/Cell Phone E-mail

Courses Completed / In Progress

Courses

Course Number	Section	Day	Number of Credits	Waitlist? Y/N	Alternate Course Number (if any)	Section

Registration Details and Prerequisites

Course schedules and descriptions, as well as registration instructions, may be found at:

http://my.simmons.edu/gslis/courses

To verify course prerequisites, click "Pre-Requisites" in the left column of the above site.

To determine when a course is typically offered, please utilize the "Course Planning Chart," which is also located in the left column.

You may find it useful to discuss your course selections with your advisor. Faculty contact information may be found at:

http://my.simmons.edu/gslis/directory/

If you have questions which cannot be answered utilizing the above resources, contact the GSLIS office at gslisadm@simmons.edu

This form can be faxed to 617-521-3192.

Simmons College Honor System Policy

I have read and agree to abide by the Honor System Policy.

_____

Signature Date

Office Use Only:

Date Received: _____ Processed By: _____