Enrollment Form

- See your advisor for program approval and signature.
- Be sure to sign up for all required sections of each course.
- Select alternate courses.
- It is your responsibility to devise a conflict-free schedule.

- Complete all columns for each class section requested.
- In the "Cr Lev" column, place a "U" if taking the course for Undergraduate Credit.
- In the "RETAKE" column, place an "R" if taking the course as a retake.

Name: _____ I.D. # _____

Primary Requests for Semester 1 — Alternate Requests for Semester 1

Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take		Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take
							A							
							B							
							C							
							D							
							E							
							F							
							G							
							H							
							I							
							J							

Total Cr Hours: _____ Advisor's Signature: _____ Date: _____

Day/Time	7:00	7:30	8:00	8:30	9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	1:00	1:30	2:00	2:30	3:00	3:30	4:00	4:30	5:00	5:30	6:00	6:30
Monday																								
Tuesday																								
Wednesday																								
Thursday																								
Friday																								

Primary Requests for Semester 2 — Alternate Requests for Semester 2

Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take		Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take
							A							
							B							
							C							
							D							
							E							
							F							
							G							
							H							
							I							
							J							

Total Cr Hours: _____ Advisor's Signature: _____ Date: _____

Day/Time	7:00	7:30	8:00	8:30	9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	1:00	1:30	2:00	2:30	3:00	3:30	4:00	4:30	5:00	5:30	6:00	6:30
Monday																								
Tuesday																								
Wednesday																								
Thursday																								
Friday																								

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- In the "Cr Lev" column, place a "U" if taking the course for Undergraduate Credit.
- In the "RETAKE" column, place an "R" if taking the course as a retake.

Name: _____ I.D. # _____

Primary Requests for Semester 3 — Alternate Requests for Semester 3

Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take		Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take
							A							
							B							
							C							
							D							
							E							
							F							
							G							
							H							
							I							
							J							

Total Cr Hours: _____ Advisor's Signature: _____ Date: _____

Day/Time	7:00	7:30	8:00	8:30	9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	1:00	1:30	2:00	2:30	3:00	3:30	4:00	4:30	5:00	5:30	6:00	6:30
Monday																								
Tuesday																								
Wednesday																								
Thursday																								
Friday																								

Primary Requests for Semester 4 — Alternate Requests for Semester 4

Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take		Course	Title	Cr Hrs	Sec	Ref #	Cr Lev	Re-take
							A							
							B							
							C							
							D							
							E							
							F							
							G							
							H							
							I							
							J							

Total Cr Hours: _____ Advisor's Signature: _____ Date: _____

Day/Time	7:00	7:30	8:00	8:30	9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	1:00	1:30	2:00	2:30	3:00	3:30	4:00	4:30	5:00	5:30	6:00	6:30
Monday																								
Tuesday																								
Wednesday																								
Thursday																								
Friday																								