

## Schedule Planning and Registration Form

<i>Please p</i> <b>Term</b>	print legib	rly									
	ne):	□ Mayme	ester	☐ Summ	ner I	Summe	r II 🔲 Fall	☐ Spring	20		
Name						GCID	Ma	Major			
(check o *In	ent Leve ne) no instance	e will more the	New Ur Returni	ndergradua ng Underg of 12 semest	er hours fron	☐ Return n any one d	Graduate* Ph ning Graduate* esignation, or a combination graduate degree program.	oneon of the Provis			
PLEASE NOTE IF THIS REGISTRATION PLACES YOU ON SENIOR STATUS, YOU SHOULD SECURE AN APPLICATION FOR GRADUATION NOW.											
<ol> <li>Select</li> <li>Select</li> </ol>	vith your Ad a preferred alternate c	l schedule a ourses and e	enter inform		tion in the ap appropriate s site.		ction.				
Prefi	ERRED	SCHE	DULE	Note	: Studen	t may no	t register for cours	e without a	dviser a	pproval.	
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?	
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Student's Signature				Date			Faculty Adviser's Signature			Date	
Major Depar	rtment Chair'	s approval of c	overload is red	quired if studer	nt is attempting	more than 10	hours per 4-week summer tern	n or more than 18	hours for on	ie full term.	