

Name DOE, JANE SSN 555-55-5555 Term Spring 2007

Local Mailing Address 121 University Blvd Daytime Phone 540-286-8000

Check the degree you are seeking: BA/BS BLS BPS MALS MEd MBA

A. COURSE REGISTRATION INFORMATION: Write your course request in the spaces below. Enter the course reference number (CRN) and course, including suffixes and section numbers, **EXACTLY** as it appears in the Course Schedule Book or the course listing on the Registrar's web page (which has the most current information). Write the course credits for each course to be taken for a letter grade or pass/fail in the appropriate column. Place the **TOTAL** credits for the term in the box below. Place a check in the Repeat Course column next to any course to be repeated. Students are required to have signed permission to take a major course at the other campus at the time of registration.

CRN	COURSE NUMBER	GRADE TYPE GRADED P/F or S/U	*REPEAT COURSE	ABBREVIATED COURSE TITLE
B I D 6 6 M B U S 5 0 1 A	A 1 3			Organization Theory + Design
	# of Credits	Skip	Skip	
TOTAL CREDITS	3	Overload Authorization (Academic Services or CGPS) MAX: _____ Authorized by: _____ <small>Students must pay additional fees for any credits over 18.</small>		

B. ALTERNATIVE COURSES: The courses listed below may be used as alternatives to replace any of the above courses should they not be available.

[illegible]

ADVISER SIGNATURE _____ DATE _____

STUDENT SIGNATURE Jane Doe DATE 11-27-06

***Permission to Repeat a Course Rules:**

To repeat a course, the original grade must be less than a C. No course can be repeated more than once. No more than two courses can be repeated in a single semester.