

Registration Worksheet

Date: _____

Term: _____ Year: _____

Student Name: _____

N-ID #: _____

Major: _____

Planned Schedule:

	Course Number	Section	Course Title	Days & Times	Credits
<i>Example:</i>	<i>MATH-UA 140</i>	<i>1</i>	<i>Linear Algebra</i>	<i>Tu-Th, 2-3:50pm</i>	<i>4</i>
Alternate:					
Alternate:					

Total # of Credits: _____

Advisor Signature _____ Date: _____