

# Office of the Registrar

## CLASS REGISTRATION WORKSHEET

For FALL 20\_\_\_\_ or Spring 20\_\_\_\_ or Summer 20\_\_\_\_

|                          |                    |
|--------------------------|--------------------|
| ID: _____                | Major 1: _____     |
| Name: _____              | Major 2: _____     |
| Registration Time: _____ | Major 3: _____     |
| Advising Time: _____     | Major 4: _____     |
|                          | Class Level: _____ |
|                          | Adviser: _____     |

| Course No. | Sec No. | Title | Crs Hrs | Mtg Times | Mtg Days |
|------------|---------|-------|---------|-----------|----------|
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**Remember to be sure to plan on selecting alternate sections and courses in the event one of your preferred selections is full or closed.**