**REGISTRATION FORM**

Name ____________________________  ID#________________________  Session:  Fall 20____  Spring 20____

**SAMPLE**

<table>
<thead>
<tr>
<th>Class #</th>
<th>Subject</th>
<th>Cat#</th>
<th>Sect</th>
<th>Advisor Signature*</th>
<th>Instructor Signature*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 0 1 4</td>
<td>MUSIC 100 01</td>
<td></td>
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OVERRIDES:  □Closed Class  □Pre-requisite  □Time Conflict  □Consent  □Unit Overload

Course 1

Alternative

OVERRIDES:  □Closed Class  □Pre-requisite  □Time Conflict  □Consent  □Unit Overload

Course 2

Alternative

OVERRIDES:  □Closed Class  □Pre-requisite  □Time Conflict  □Consent  □Unit Overload

Course 3

Alternative

OVERRIDES:  □Closed Class  □Pre-requisite  □Time Conflict  □Consent  □Unit Overload

Course 4

Alternative

OVERRIDES:  □Closed Class  □Pre-requisite  □Time Conflict  □Consent  □Unit Overload

Course 5

Alternative

OVERRIDES:  □Closed Class  □Pre-requisite  □Time Conflict  □Consent  □Unit Overload

Course 6

Alternative

OVERRIDES:  □Closed Class  □Pre-requisite  □Time Conflict  □Consent  □Unit Overload

*Signatures required:

1. **Instructor:** Closed Class, Requisite, Time Conflict, and Consent.
2. **Advisor:** Advisor signature is required for each and every class.

Student Signature: ____________________________  Date: ____________________

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