COURSE REGISTRATION FORM

DUE TO REGISTRAR'S OFFICE BY PUBLISHED DEADLINE

FIRST COMPLETE ALL REQUIRED INFORMATION ON ENROLLMENT FORM

INDEPENDENT STUDY: Register below for "SIS___," listing title as "Ind Stu: ___[specific title]___." A proposal must be submitted at least one week prior to the semester registered, along with the Independent Study Request form, signed by the supervising instructor (form available online at http://www.ltsp.edu/academic/course_info.html). Registration here is provisional, pending approval of proposal by the Faculty (for first-professional-level studies) or Dean (for advanced-level studies).

AUDIT: With instructor permission, a course may be audited (one per term). There are ***no refunds*** for withdrawal after classes have begun. Enter "0" under UNITS and place a check in the box following.

CHANGES IN REGISTRATION: (Drop, add, change audit/credit.) You may *add* or *change* courses at any time through the late registration (drop/add deadline) without penalty. You may *drop* a course through the late registration deadline with payment of a $20 cancellation fee. Dropping a course after the drop/add deadline is subject to the rules of the Withdrawal Policy. By the deadline for changes, notify the Registrar in writing via mail, fax, or e-mail, or file a Change of Registration Form, available from Enrollment Services.

For MDiv, MAR, and Special/Certificate students only (not required for Advanced-Level and non-matriculated students):

THE SIGNATURE OF YOUR ADVISOR is required to validate all registrations, ***except for summer courses***. In lieu of an actual signature, you may **attach** a printed e-mail of his/her approval, provided the message clearly includes your name, the date, and the courses for which you wish to register.

THE SIGNATURE OF THE COURSE INSTRUCTOR (or attached email equivalent per above) is required if you are registering for a course without having met the stated pre-requisites; if you are registering for an advanced-level course (600s or above); or if course enrollment has been previously announced as closed. Please be advised that instructor permission does not guarantee admission to the course.

NAME: _____ ***E-mail address*** (for consultation on this registration) (required): _____

[Last] [First] [Initial]

DEGREE/PROGRAM: _____ ***TERM:*** ___August ___Fall ___January ___Spring ___Summer ***ACADEMIC YEAR:*** _____

To Be Completed by All Students **For MDiv/MAR students only**

COURSE NUMBER	ABBREVIATED COURSE TITLE	INSTRUCTOR	UNITS	CHECK IF AUDITING	SIGNATURE OF INSTRUCTOR, IF REQUIRED PER ABOVE	DEGREE REQUIREMENT TO BE FULFILLED BY COURSE

I am registering as indicated by entries above. I have read and understand the policies described in this registration set, including those on registration, withdrawal from courses, course extensions, program continuations and extensions, and payments. I accept liability for all charges incurred with the above registration.

STUDENT SIGNATURE: _____ ***DATE***: _____

If required per above: **Advisor Name*:*** _____ **Signature:** _____ (OR check here ___if e-mail attached)

Submit along with Enrollment Form to Enrollment Services.
Non-Matriculants and Auditors must also submit Financial Information Form and payment in full.

FOR OFFICE USE ONLY:

Postmark _____ Late Reg? Y N Payment Received: Y N Check Amt $_____ Housing Y N _____

Rec'd _____ Date Ent'd _____ Credit Amt $_____ Check # _____ Meals Y N _____

Notes: