Date: _____/_____/20_____

SNC ID: ________________________________

Student Name: ________________________________________________________________

Indicate Semester: _____Fall / _____Winter / _____Spring / _____Summer  Year: 20_____

Term Session (for Summer Sessions): ____________

If you are seeking to enroll in a course that is listed in the Catalog (i.e. BIOL 201 Botany) and it is not being offered during the semester indicated then check the Arranged Course block and insert the Catalog discipline, number, and title in the box below. If the course is an Independent Study, Directed Research, Internship, or Student Thesis then check the appropriate box and indicate the discipline, number, and course title not to exceed 30 characters.

_____ Arranged Course (List Catalog Course I.D. Below)
_____ Independent Study (490/590) ______ 2 credits or ______ 4 credits
_____ Directed Research (492) ______ 2 credits or ______ 4 credits
_____ Internship (494) 4 Credits (Graded S/U)
_____ Senior Thesis (496) 4 Credits

Subject: ____  Course: |____|____|____| - |____|  Assigned Section: Office Use Only

Course Title: ________________________________  (Limit title to 30 characters or less – titles provided will be added to generic non-arranged course titles on transcripts)

Registration Instructions

1. For arranged courses, provide an attached syllabus tailored to the individualized instruction.
2. For all non-arranged courses, attach a brief description of this course and include a plan of assignments and methods of evaluation of student work.
3. This form is to be completed, including all signatures below, before it will be accepted for registration.
4. A student may register for a Special Course during the add period of any semester. No registration will be accepted after the end of the add period. If this course results in an overload (>18 credits), permission is required from your advisor* and overload charges will apply.
5. Students seeking to turn a registered course into an Honors or Writing Intensive section by special arrangement need to file a Substitution Form with the Director(s) of the Core Curriculum or Honors Programs.

______________________                 ____________________              _____________________
Student Signature                                         Divisional Dean Approval                                      Academic Advisor Approval *
                                                                                           Allows overloads up to 20cr

______________________                 ____________________              _____________________
Instructor Approval                                         Printed Instructor Name                                      Instructor Office and Room Number

CRN:_____________  DATE:_____________  REG BY:_____________