

Office of Registrar

Advising & Registration Form

Semester: ----- Academic Year: -----

To be completed by the Student :

Name		ID	
Program		Contact No	
Campus		Signature	

Before you actually register, take a few moments to complete the course worksheet below. Check the schedule of classes for the appropriate course number (CRN) for each lecture, tutorial, Pre requisites, Co requisites, laboratory or practical session keep in mind there may be specific lectures that are linked to (must be registered with) a specific laboratory or clinical.

Courses

CRN	Course Code	Course Title	Course type	Section	Credit Hours
TOTAL CREDIT HOURS					

*Minimum CR H allowed 9
Maximum CR H allowed 18

Student Advisor _____
Name
Signature
Date

OFFICE USE:

REMARKS : _____

Staff : _____
Name
Signature
Date