UNIVERSITY OF MARY WASHINGTON

COURSE REGISTRATION REQUEST
OFFICE OF THE REGISTRAR

Rev. 10/06

Name _____ ID # _____ Term _____
last first middle

Local Mailing Address _____ Daytime Phone _____

Circle the degree you are seeking: BA/BS BLS BPS MEd MBA MBAMS MS

A. COURSE REGISTRATION INFORMATION: Write your course request in the spaces below. Enter the course refernce number (CRN) and course, including suffixes and section numbers, **EXACTLY** as it appears on the course listing on the Registrar's web page. Write the course credits for each course to be taken for a letter grade or pass/fail in the appropriate columns. Place the TOTAL credits for the term in the box below. Place a check in the Repeat Course column next to any course to be repeated. Students are required to have signed permission to take a major course at the other campus at the time of registration.

CRN	COURSE NUMBER SECT	GRADE TYPE GRADED	GRADE TYPE P/F or S/U	*REPEAT COURSE	ABBREVIATED COURSE TITLE
	TOTAL CREDITS			Overload Authorization (Academic Services or CGPS)	MAX:_____ Authorized by:_____

Students must pay additional fees for any credits over 18.

B. ALTERNATIVE COURSES: The courses listed below may be used as alternatives to replace any of the above courses should they not be available.

CRN	COURSE NUMBER SECT	GRADE TYPE GRADED	GRADE TYPE P/F or S/U	*REPEAT COURSE	ABBREVIATED COURSE TITLE

ADVISER SIGNATURE _____ **DATE** _____

STUDENT SIGNATURE _____ **DATE** _____

Permission to Repeat a Course Rules:
To repeat a course, the original grade must be less than a C . No course can be repeated more than once. No more than two courses can be repeated in a single semester.