

# UNIVERSITY OF DALLAS

## BRANIFF GRADUATE SCHOOL OF LIBERAL ARTS

### STUDENT REGISTRATION FORM

Name: last \_\_\_\_\_ first \_\_\_\_\_ middle \_\_\_\_\_ UD ID Number \_\_\_\_\_  
 \_\_\_\_\_  
 Class: Master's, Doctoral, Special \_\_\_\_\_ Major \_\_\_\_\_

FALL \_\_\_\_\_ 20\_\_\_\_\_  
 SPRING \_\_\_\_\_ 20\_\_\_\_\_  
 MAYTERM \_\_\_\_\_ 20\_\_\_\_\_  
 SUMMER I \_\_\_\_\_ 20\_\_\_\_\_  
 SUMMER II \_\_\_\_\_ 20\_\_\_\_\_

With your Program Director's advice and approval, fill in your schedule request below. (Program Director's signature must be obtained before coming to registration.) Include all course information. Indicate AUDIT courses with an X in the proper box.

	Department	Course Number	Section	Audit	Semester Hours	Course Title	Professor	Circle Days			
								M T W T F			
5								M T W T F			
6								M T W T F			

TOTAL \_\_\_\_\_

\_\_\_\_\_  
Program Director's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Graduate Dean's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
IPS Director's Signature (IPS Students Only)

\_\_\_\_\_  
Date