

COURSE SELECTION

IF YOU NEED ASSISTANCE, SEE THE ADVISING/COUNSELING OFFICE. NOTE: YEAR = LAST TWO DIGITS OF CURRENT YEAR. TERM: FA=Fall, SP=Spring, SU=-Summer														
			ASTIWO						-FALL, SP-	SPRING, SU-	SUIVIIVIER			
310	JDENT ID NU	MBEK		NAME (L	Name (last, first, mi)									
TEL	EPHONE NU	MBERS:		STREET A	STREET ADDRESS, CITY, STATE, ZIP				IS THIS A CHANGE?					
HOME:					□ YES □ NO							NO		
Work:				E-MAIL AI	E-MAIL ADDRESS									
CELL:														
YEAR/TERM				PROGRAM	Program									
TEOLY TENIE				TROGRAM	I NOONAIVI									
STEF	1: COURSE SEL													
A.				LIST AN ALTERNATI	VE COURSE FOR E	ACH SELECTION	SINCE S	SOME SECTIONS M	1AY BE CLOSED O	R CANCELLED. CH	HECK THE AUDIT	BOX ONLY IF		
YOU DO NOT WANT CREDIT FOR THE COURSE. B. WHEN COMPLETED TAKE THIS FORM TO THE ADMISSIONS, REGISTRATION AND RECORDS OFFICE.														
υ.	WHEN COMPLE				CE COURSES				SECOND CHOICE COURSES					
				COURSE				SECTION COURSE COURSE SEM. AUDIT				AUDIT		
	NUMBER		EFIX	NUMBER	CREDITS	(NO		NUMBER	PREFIX	NUMBER	CREDITS	(NO		
				-		GRADE)						GRADE)		
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2							2							
2							2							
3							3							
4							4							
5							5							
				L CREDITS	L L			TOTAL CREDITS						
STUDENT'S SIGNATURE DATE STAFF SIGNATUTRE (IF APPLICABLE) DATE														
STEP 2: PAYMENT OF FEES														
REGISTRATION IS <u>NOT</u> COMPLETE UNTIL THE FEES ARE PAID.														
A. STUDENTS PAYING BY CHECK, CASH, MONEY ORDER OR CREDIT CARD — PROCEED TO THE BURSAR/CASHIER, STUDENTS MAY PAY BY CREDIT CARD THROUGH WEBSITE.														
B. IF YOU EXPECT TO RECEIVE FINANCIAL AID, PLEASE CONTACT YOUR CAMPUS FINANCIAL AID OFFICE.														
C. STUDENTS WITH FLORIDA PRE-PAID OR PRIVATE SCHOLARSHIPS MUST GO TO THE BURSAR/CASHIER OFFICE. D. STUDENT ELIGIBLE FOR A VETERAN'S DEFERMENT — GO TO THE ADMISSIONS, REGISTRATION AND RECORDS OFFICE, THEN PROCEED TO THE BURSAR/CASHIER.														
IF YOUR RESIDENCY STATUS HAS CHANGED SINCE YOU LAST REGISTERED, SUBMIT A CERTIFICATE OF RESIDENCY AND NECESSARY DOCUMENTATION BEFORE PRESENTING THIS FORM FOR														
PROCESSING														
FOR OFFICE USE ONLY														
				CLEARED/APPI	ROVED BY:	DAT	E		_	CLEARED/AP	PROVED BY:	DATE		
ТО	TAL HOURS							MISSING PR REQUISITE	KE-					
BURSAR HOLD		\$						MISSING CO)-					
LIB	RARY HOLD							LATE						
								PROCESSING	G					
	FT HOLD							OTHER						
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CO	MMENTS													