

수강 신청서 Course Registration

Student Information / 학생 정보			
Student Name / 이름:		Today's Date / 오늘 날짜:	
Semester / 학기:		Year / 년:	
Address :	City:	State :	Zip Code :
Mobile Phone :		Home Phone:	
E-mail:		Degree / 과정:	
Denomination / 교단:		Church Membership / 소속교회:	

Course # 과목번호	Section # 지역번호	Course Description 과목 명	Hours & Days 수업 날짜/시간	Professor 교수	# of Credits 학점

Student Signature (학생 싸인): _____ Registrar Approval: _____

FOR OFFICE USE ONLY (학교 사무실 전용) PLEASE DO NOT WRITE BELOW THIS LINE

___ Student Spouse Rate	___ Matriculation Fee	Probation: YES ___ NO ___
___ Child of Alumni/ae	___ Student Association Fee	Other: _____
___ Native American Grant	___ Late Registration Fee	Total Hours: _____
___ F-1 Visa Student	___ Sustaining Fee	Cost per Credit: _____
___ Cross-Registration Student	___ Change of Course Fee	TOTAL COST: _____

Site: _____

Advisor Approval: _____