



Required to enroll in more than 22 units. Processed after registration rotation cycle. Due 8th day of instruction by 5:00pm.

WINTER 20 ____ SPRING 20 ____ SUMMER 20 ____ FALL 20 ____

Student ID # Major

Student Name *Print* Last First Middle

Phone Email

TOTAL # OF UNITS FOR TERM SELF-REPORTED GPA (2.0 and above eligible)

x _____
Student Signature (REQUIRED) Date

x _____
Dept Head/Grad Advisor Signature (REQUIRED) Date

staff: _____ date: _____