

Spring Hill College

Graduate and Continuing Studies

Registration Form

Term 200

Please enter your preferred course(s) and return this form no later than the published deadlines for mail registration or on-campus registration. Your adviser will review your selections and sign, if approved. If changes are necessary, you will be contacted. PLEASE NOTE: If you are a new student you must talk to your adviser before completing this form.

SS# Adviser's Name

Full Name Program/Major

Address

City State Zip

Daytime phone number Evening phone number E-mail

Have your address or telephone number changed since the last registration? Yes No

Table with 3 columns: Course ID, Course Name / Time / Date, Credits. Multiple rows for course entry.

I understand that I am officially registering for the course(s) I have listed above. I must cancel the course to avoid financial and academic penalties.

Student's signature Date

PLEASE NOTE: Please cancel your course(s) if you do not plan to attend.

For Campus Use Only

Adviser's Signature Date

Mail or Fax to:

Division of Graduate and Continuing Studies
Spring Hill College ♦ 4000 Dauphin Street ♦ Mobile AL 36608-1791
Phone: (251) 380-3065 (LLL) 380-3094 (Grad) ♦ Fax: (251) 460-2190