California State University, Stanislaus
Enrollment Services

SPECIAL REGISTRATION FORM

INSTRUCTIONS

- Complete form and obtain all appropriate signatures
- Supporting documents may be required by the department for each category. Please check with your College
- Special Registration forms must be submitted to Enrollment Services for processing **before the last day to add a class**

Please check one of the following:

UNDERGRADUATE

☐ Cooperative Education 4910
☐ Internship/Fieldwork 4900, 4940
☐ Senior Seminar 4960
☐ Senior Thesis 4990

GRADUATE / POSTBAC

☐ Internship/Fieldwork 5900, 5940
☐ Project 5960, 5962
☐ Thesis 5990, 5992

DOCTORATE

☐ Internship/Fieldwork 9940
☐ Project 9960
☐ Dissertation 9990

Name:_____ **University ID #:**_____
Last First MI

Phone #: ( )_____ **Email:** _____

Course to be taken during: ☐ Spring _____ ☐ Summer _____ ☐ Fall _____
Year Year Year

Subject: ☐☐☐☐ **Catalog #:** ☐☐☐☐ **# of Units for Course:** _____

☐ Letter Grade ☐ Credit/No Credit **Instructor:** _____
(Please print) First Last

Excess Units:_____ **Excess Unit Approval:**_____
If taking above maximum allowable units (Required) Department Chair Signature

Student's Signature: _____ **Date**: _____

Signatures must be obtained in the order listed:

Instructor's Signature:_____ ☐ Approve ☐ Deny **Date:**_____

Advisor's Signature:_____ ☐ Approve ☐ Deny **Date:**_____

Department Chair's Signature:_____ ☐ Approve ☐ Deny **Date:**_____

Dean's Signature (as required by College):_____ ☐ Approve ☐ Deny **Date:**_____

Office Use Only---To be completed by Enrollment Services CRN ☐☐☐☐☐-☐☐☐

ES:5/22/15 **Initial/Date:**