





# Student Registration Form

Registration Checklist	
Advisor	_____
Student Billing	_____
Financial Aid	_____
Bus. Office (Payment)	_____
Registrar	_____
Please Note: All steps above must be completed in order.	

NAME: \_\_\_\_\_  
First M.I. Last

Semester: \_\_\_\_\_ Anticipated Date of Graduation: \_\_\_\_\_

COURSE NUMBER	Section Number	COURSE NAME	CREDIT HOURS

Total Credit Hours \_\_\_\_\_

**Section Numbers:**  
 81 = Online Term I      82 = Online Term II

**Online Course Listing**  
[www.davisny.edu/onlinecourses/index](http://www.davisny.edu/onlinecourses/index)

I plan to complete Student Ministry Credit this semester.       Yes       No

*Full-time students must complete a semester of student ministry for every full-time semester enrolled. Part-time students must satisfy the number of semesters required for the certificate or degree. Contact Student Development to ensure this on-going requirement is satisfied.*

Advisor's Approval \_\_\_\_\_

**READ CAREFULLY BEFORE SIGNING:** I affirm that the information on this registration form is correct and accurate, and accept responsibility for being registered for the courses listed above for the coming semester at Davis College.

I also acknowledge that if I have elected to take a reduced load or have registered for courses out of the catalog sequence that I will need to enroll for additional semesters to complete my program.

\_\_\_\_\_  
 Student's Signature      Date

< < < COMPLETE OTHER SIDE > > >