

Tuskegee University COURSE SELECTION FORM

TERM _____ DATE _____

STUDENT NAME _____ STUDENT ID NUMBER _____

LAST
FIRST
MIDDLE

IT IS THE STUDENT'S RESPONSIBILITY TO PROVIDE THE CORRECT COURSE AND SECTION NUMBER WHICH CORRESPONDS TO THE DAY AND TIME OF CLASSES SELECTED.

() Undergraduate () Graduate () VM-DVM ONLY () Unclassified

INSERT BEGINNING CLASS HOUR

Course & Catalog Number	Section Number	Cr. Hrs.	*R	M	T	W	TH	F	S	Building & Rm. #	Instructor

***Mark 'X' in The REPEAT (R) Column if you are repeating a course.**

STUDENT'S SIGNATURE _____

APPROVED BY _____

ADVISOR OR DEAN'S SIGNATURE

COLLEGE/MAJOR _____

TOTAL HOURS APPROVED _____