

# COURSE REGISTRATION FORM

Summer 20\_\_\_\_  Autumn 20\_\_\_\_  Spring 20\_\_\_\_

Student Full Name (Print) \_\_\_\_\_ Cougar ID# \_\_\_\_\_

School Name: \_\_\_\_\_ School Counselor Name: \_\_\_\_\_

**Students must submit separate forms for each semester in which they intend to enroll in courses AND a new form for each schedule change**

**Please send completed forms to your CCP Advisor. If advisor is unknown, send completed forms to [ccpadvising@csc.edu](mailto:ccpadvising@csc.edu)**

**Student's Maximum Credit Hours (To be completed by Public High School Representative only):**

1. Place the number of high school based credits a student is taking during the academic year on line (a).
2. Multiply the number on line (a) by 3 to complete line (b).
3. Subtract line (b) from 30, giving students the total number of semester hours available (c) for which they will receive funding for this academic year (Summer/Autumn/Spring).

(a) \_\_\_\_\_ X3 = (b) \_\_\_\_\_, then 30 - (b) \_\_\_\_\_ = (c) \_\_\_\_\_

**If maximum credit hours are not listed, registration will not be completed** **Homeschool/Nonpublic students:** submit ODE award letter and include amount here: \_\_\_\_\_

Class Name (i.e. ENGL xxxx)	Section # (3 digits)	Synonym # (5 digits)	Cred Hrs.	Course Title (i.e. Composition I)	Section days/times

**Forms cannot be processed without section or synonym information**

Student's Name (Print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's/Guardian's Name (Print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

High/Middle School Representative's Name (Print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Entered By	Date	REGISTRATION--OFFICE USE ONLY	Supporting Documents
			Registration Consent
			SSID #
			Max Hours