



171 Moultrie Street • Charleston, South Carolina 29409-6250
 Phone: (843) 953-5089 • Fax: (843) 953-7630

GRADUATE REGISTRATION WORKSHEET

Please complete every item on this form, sign and date this worksheet, and return it with \$30 **non-refundable** application fee.

_____-_____-_____-_____ _____
 Social Security Number Date

 Last Name First Middle

 Street Address

 City County State Zip

 Home Phone

 Email Address

Students are both academically and financially responsible for courses in which they are registered.

Maymester			
Course ID: example: PSCI-510-01	PSCI-510 Film and Politics		3CR
_____	10058 01 LEC MTWRF 1-4 CAPER 412		Wehrman J

Summer I			
Course ID: example: PSCI-510-01	PSCI-510 Film and Politics		3CR
_____	10058 01 LEC MTWRF 1-4 CAPER 412		Wehrman J

Summer II

Course ID: example: PSCI-510-01

PSCI-510 Film and Politics

3CR

10058 01 LEC MTWRF 1-4 CAPER 412

Wehrman J

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Student Signature: _____

Date: _____

