



Special Course Registration Form

Arranged, Independent Study, Research,
Internship, Thesis or Audit

Registrar's Office - 141 Todd Wehr Hall - 920.403.3949

Date: ____/____/20____

SNC ID: _____

Student Name: _____

Indicate Semester: ____ Fall / ____ Winter / ____ Spring / ____ Summer Year: 20____

Term Session (for Summer Sessions): _____

If you are seeking to enroll in a course that is listed in the Catalog (i.e. BIOL 201 Botany) and it is not being offered during the semester indicated then check the Arranged Course block and insert the Catalog discipline, number, and title in the box below. If the course is an Independent Study, Directed Research, Internship, or Student Thesis then check the appropriate box and indicate the discipline, number, and course title not to exceed 30 characters.

- _____ Arranged Course (List Catalog Course I.D. Below)
- _____ Independent Study (490/590) _____ 2 credits or _____ 4 credits
- _____ Directed Research (492) _____ 2 credits or _____ 4 credits
- _____ Internship (494) 4 Credits (Graded S/U)
- _____ Senior Thesis (496) 4 Credits

Subject: _____ Course: |_____| |_____| |_____| - |_____| Assigned Section: Office Use Only

Course Title: _____
(Limit title to 30 characters or less – titles provided will be added to generic non-arranged course titles on transcripts)

Registration Instructions

1. **For arranged courses**, provide an attached syllabus tailored to the individualized instruction.
2. **For all non-arranged courses**, attach a brief description of this course and include a plan of assignments and methods of evaluation of student work.
3. This form is to be completed, including all signatures below, before it will be accepted for registration.
4. A student may register for a Special Course during the add period of any semester. **No registration will be accepted after the end of the add period.** If this course results in an overload (>18 credits), permission is required from your advisor* and overload charges will apply.

This course will fulfill the requirement for: _____
(example: Major or Minor elective)

Student Signature

Dean Approval

Academic Advisor Approval *
Allows overloads up to 20cr

Instructor Approval

Printed Instructor Name

Instructor Office and Room Number

CRN: _____

DATE: _____

REG BY: _____