# *Student Registration Worksheet*

Student Name: _____ Student ID #: ☐☐☐☐☐☐☐

List below the open class sections you are eligible to take after carefully checking the catalog and current class schedule. Enrollment in duplicate or conflicting classes is not permitted. Be sure to check for prerequisites and co-requisites.

| SCHEDULE NUMBER | DEPARTMENT AND NUMBER | UNITS | DAYS | TIME BEGIN/END | ROOM | INSTRUCTOR |
|---|---|---|---|---|---|---|
| **Example:** 00056 | **English 1A** | **4.0** | **Mon.** | **7:00 - 10:00** | **LA-100** | **Walters** |
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| Maximum and/or Excess Units Allowed | # Units | |
|---|---|---|
| Probation Cleared | | Approved by:_____ Date:_____ |

## Permission for Substitute Registration

_____

Please print the FULL name of your authorized substitute here

The above named person is authorized to register me and to see and discuss my confidential educational records with college employees, as necessary, to complete my registration. He/she is also authorized to sign all registration materials in my name, and I agree to be legally bound by his/her actions. I further understand and agree that the college has no obligation to adjust my class schedule to correct errors or omissions resulting from the actions of my substitute.

_____ _____ _____

Your signature Print your FULL name Date