

JEFFERSON GRADUATE SCHOOL OF BIOMEDICAL SCIENCES REGISTRATION FORM

Personal Information:

Campus Key	<input style="width: 90%;" type="text"/>	Last Name	<input style="width: 90%;" type="text"/>	First Name	<input style="width: 90%;" type="text"/>	Middle Initial	<input style="width: 90%;" type="text"/>
Phone (Day)	<input style="width: 90%;" type="text"/>	Phone (Evening)	<input style="width: 90%;" type="text"/>	Do you plan to apply for TJU/TJUH employee tuition benefits (?)			
				<input type="checkbox"/> Yes <input type="checkbox"/> No <i>[Forms are available in Human Resources]</i>			
Degree Sought	<input style="width: 90%;" type="text"/>	PhD Programs -	<input style="width: 90%;" type="text"/>		MS Programs	<input style="width: 90%;" type="text"/>	

Credits: Full-time PhD students must register for 20 credits for the Fall, 30 credits for the Spring, and 10 credits for the Summer
 Full-time MS students must register for 9 credits or more per term

Registration for which term:

CRN Number	SUBJECT	COURSE #	SECTION #	TITLE	CREDITS	<u>OFFICE USE ONLY</u>

PLEASE NOTE: The signed form must be returned to the Registrar's Office in G22 Curtis. FORMS WITHOUT APPROPRIATE SIGNATURES WILL NOT BE ACCEPTED

_____ Advisor, Program Director or Associate Dean's Signature	_____ Date	_____ Student's Signature	_____ Date
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