

# Course Registration ONE-STOP FORM

## Berry College, Office of the Registrar

Use for: in-office registration (Add-Drop), course withdrawal, and special authorizations

Name \_\_\_\_\_ ID # \_\_\_\_\_  

Last
First
MI

Registration Semester/Year \_\_\_\_\_ (ex: FA, SP, SU then the year)

If a course requires authorization (directed study, internship, etc.), please complete the Authorization Form on the back of this page and bring to the Registrar's office. Remember all courses must be during the posted add/drop period each semester. Be sure to submit authorization forms as soon as possible.

|     | Department & Course Number | Section | Credit Hrs. |  |
|-----|----------------------------|---------|-------------|--|
| Add |                            |         |             | <p><b><i>Any time conflicts require the permission of the faculty member whose class will be missed and must be approved by the Provost prior to registration.</i></b></p> <p><i>(Use this space for time conflict approval signatures.)</i></p> |
| Add |                            |         |             |  |
| Add |                            |         |             |  |
| Add |                            |         |             |  |
| Add |                            |         |             |  |
| Add |                            |         |             |  |
| Add |                            |         |             |  |
| Add |                            |         |             |  |
| Add |                            |         |             |  |

|      | Department & Course Number | Section | Credit Hrs. | WITHDRAW (Circle One) | Instructor's Signature (not required during add/drop period) |
|------|----------------------------|---------|-------------|-----------------------|--|
| Drop |                            |         |             | W   WF                |  |
| Drop |                            |         |             | W   WF                |  |
| Drop |                            |         |             | W   WF                |  |
| Drop |                            |         |             | W   WF                |  |
| Drop |                            |         |             | W   WF                |  |
| Drop |                            |         |             | W   WF                |  |

**PLEASE NOTE: After the posted add/drop period closes (fourth day of each semester), students may withdraw only. Instructor must circle grade and sign for all withdraw requests.**

Student's Signature \_\_\_\_\_

Advisor's Signature \_\_\_\_\_

Advisor's Signature \_\_\_\_\_

|  |
|--|
| Office use:<br>Hours from _____ to _____ Effective date _____ Initials _____ |
|--|

## Special Course Authorization

*Use for: registrations requiring special authorization such as directed studies or internships.*

**-Directed Studies (498)**

These courses must be approved by the supervising instructor, department chair and the dean of the school offering the course. A directed study occurring outside the United States must also be approved by the International Programs Director. Once this form is completed and submitted to the Registrar's office, students will be added to the course. Please check your schedule on VikingWeb to confirm course enrollment.

**-Internships (496)** Internship Learning Agreement forms are available in the Career Development Center, Room 310, Krannert Center. The completed Internship Learning Agreement must be submitted to the Provost's Office for approval during the add/drop period. Once approved by the Provost, the form will be automatically sent to the Registrar's Office for registration.

**Fill out one Authorization Block for each special authorization course.**

| Special Course Authorization #1  |                            |              |
|--|----------------------------|--------------|
| Department / Course Number   | Title (30 character limit) | Credit Hours |
|  |                            |              |
| <b>START DATE:</b> _____ <b>END DATE:</b> _____ <b>SUMMER BLOCK:</b> _____                                 |                            |              |
| Instructor:  | _____                      | _____        |
|  | Sign                       | Print Name   |
| Dept. Chair:   | _____                      | _____        |
|  | Sign                       | Print Name   |
| School Dean:   | _____                      | _____        |
|  | Sign                       | Print Name   |
| _____<br>Signature of International Programs Director<br>(required if independent study is out-of-country) |                            |              |

| Special Course Authorization #2  |                            |              |
|--|----------------------------|--------------|
| Department / Course Number   | Title (30 character limit) | Credit Hours |
|  |                            |              |
| <b>START DATE:</b> _____ <b>END DATE:</b> _____ <b>SUMMER BLOCK:</b> _____                                 |                            |              |
| Instructor:  | _____                      | _____        |
|  | Sign                       | Print Name   |
| Dept. Chair:   | _____                      | _____        |
|  | Sign                       | Print Name   |
| School Dean:   | _____                      | _____        |
|  | Sign                       | Print Name   |
| _____<br>Signature of International Programs Director<br>(required if independent study is out-of-country) |                            |              |