



CLEARANCE AND REGISTRATION FORM

SEMESTER _____ 20 __ _	
Date	Student ID
Student Name	
Mobile number	
Scholarship <input type="checkbox"/> No <input type="checkbox"/> Yes _____	
FINANCE OFFICE	
PROGRAM <input type="checkbox"/> REG <input type="checkbox"/> MBA	
Credits Cleared	Total hrs paid
Finance Office Approval	

COURSE CODE	SECTION	DAY/TIME	ADVISOR APPROVAL
Class 1			
Class 2			
Class 3			
Class 4			
Class 5			
Overload*			

***ONLY STUDENTS WITH G.P.A. 2.0 AND ABOVE MAY REGISTER FOR OVERLOADS. SEE ADVISORS FOR DETAILS**
STUDENTS ON A SCHOLARSHIP ARE NOT ALLOWED TO OVERLOAD AND ARE KINDLY REQUESTED TO SEEK FURTHER APPROVAL/ CLARIFICATIONS FROM THEIR SPONSOR.

Dean/ Chair Approval (if required)	Date
Registrar's Signature	Posted Date

- **SCHEDULES WILL ONLY BE ACCEPTED BY THE REGISTRAR'S OFFICE AFTER THE ADVISOR'S SIGNATURE**
- **BY SIGNING THIS FORM THE STUDENT ACCEPTS LEGAL RESPONSIBILITY FOR ANY CHARGES THEY MAY INCUR.**
- **AS AN AUD STUDENT ONLY YOU ARE RESPONSIBLE FOR CHOOSING THOSE COURSES THAT MEET THE REQUIREMENTS OF YOUR DEGREE PROGRAM.**

STUDENT SIGNATURE

DATE mm/dd/yy