



Course Registration and Record Form

1. Personal Information:

Student Name _____ Date of Birth _____ Student ID No. _____
Address _____
Phone _____ Email _____

2. Program of Study :

3. Applying for Year (20)

4. Course Taking :

Course #	Course Name	Instructor	Units	Tuition	Remarks	Grade
Tuition Fees						
Total						

Student's Signature _____ Date _____

Academic Dean's or
Director's Signature _____ Date _____