



HOBART AND WILLIAM SMITH COLLEGES

Office of the Registrar • Geneva, New York 14456-3397 • (315) 781-3651 • Fax (315) 781-3920

HWS GRADUATE STUDENT (MAT) REGISTRATION FORM

Last name First name Student ID Number Date

FALL SEMESTER /YR: (Please select one track plus either EDUC 800):

- ADOL: **EDUC-601 *EDUC-602 *EDUC-603 ** = Graded
CHILD: **EDUC-604 *EDUC-605 *EDUC-606 * = Credit/No Credit
CHILD (SPEC. ED): **EDUC-604 *EDUC-605 *EDUC-607
X MASTERS PROJECT (Req'd): **EDUC-800

SPRING SEMESTER /YR:

Students: Complete the section below by securing the instructor permission to take UNDERGRADUATE courses at the GRADUATE level. You will be required to register for EDUC-820. In addition, register for three GRADUATE courses and either EDUC-801 or EDUC-803. Submit the completed form with all required signatures to the Registrar's Office by 4 p.m., Wednesday of Advising Week.

Instructor: Please use the course numbering key below to designate graduate level course numbers.

COURSE NUMBERING KEY: 100 LEVEL UGRAD COURSES -> RENUMBER TO 500-LEVEL, 200 LEVEL UGRAD COURSES -> RENUMBER TO 600-LEVEL, 300 LEVEL UGRAD COURSES -> RENUMBER TO 700-LEVEL, 400 LEVEL UGRAD COURSES -> RENUMBER TO 800-LEVEL

1.) REQUIRED COURSE **EDUC-820 Graduate Education

Instructor Signature Date

2.) Check one option: MASTERS PROJECT: *EDUC-801 -OR- MASTERS THESIS: *EDUC-803

3.) Graded Option Only

UGRAD Class NO. Dept. and Course NO. Course Title
Note to Instructor: Select ONE option: Register student within the current undergraduate MAX enrollment- please initial here
Register student in addition to current undergraduate MAX enrollment- please initial here

GRADUATE Dept. and Course NO. Instructor Signature Date

4.) Graded Option Only

UGRAD Class NO. Dept. and Course NO. Course Title
Note to Instructor: Select ONE option: Register student within the current undergraduate MAX enrollment- please initial here
Register student in addition to current undergraduate MAX enrollment- please initial here

GRADUATE Dept. and Course NO. Instructor Signature Date

5.) Graded Option Only

UGRAD Class NO. Dept. and Course NO. Course Title
Note to Instructor: Select ONE option: Register student within the current undergraduate MAX enrollment- please initial here
Register student in addition to current undergraduate MAX enrollment- please initial here

GRADUATE Dept. and Course NO. Instructor Signature Date

Signature of Graduate Advisor Date Signature of Director of MAT Program Date