REGISTRATION FORM

Office of Instruction & Student Affairs, 260 Mulford Hall Berkeley, CA 94720-3100 • Tel: (510) 642-0542 • Fax: (510) 643-3132

	Fall Spring 20	Semester		
Name:		SID#	SID#:	
Major:	Academic Advi	isor:		
Phone:	Email:			
Make sure to check dea	central.berkeley.edu. For more information adlines on the Student Enrollment Calend and prerequisite information, refer to guid	lar: <u>registrar.be</u>	erkeley.edu/calendar	
or oddiod dodding heric	Tentative Class Sch		<u>u</u>	
Class Number	Department & Course Number (e.g., English 1A)	Units	Grading Option	
			Letter Grade P/NP	
			Letter Grade P/NP	
			Letter Grade P/NP	
			Letter Grade P/NP	
			Letter Grade P/NP	
			Letter Grade P/NP	
			Letter Grade P/NP	
			Letter Grade P/NP	
Student's Signature:			te:	
Academic Advisor's Signature*:			te:	
Faculty Advisor's Sig (Only declared NS-Dietetics a	nature: and EMF/FNR students are required to obtain faculty s	Da signatures)	te:	
each semester. For eve	sor's signature required. All CNR students ery semester that a student would like to ge student must request special permission	go below the 12	2-unit minimum or exceed the	
	For CNR Office Use	ONLY		
Advisor Hold Release	ed By: Date:	Comm	nents:	

Revised October 24, 2019