

Course Registration Form

Name: _____

BU ID#: _____

Date: _____

Current Courses

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

Other Majors or Minors, declared or contemplated:

Proposed Courses for Next Semester

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

Other Possible Courses

1. _____

2. _____

3. _____

4. _____

Faculty Advisor's Signature