

**Florida State University  
Academic & Professional Program Services**

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P. O. Box 3061640, Tallahassee, Florida 32306-1640  
Telephone: (850) 644-3801 / Fax (850) 644-3803

**Course Registration Form**

Social Security Number	Admission Status			Term	Year
	Undergrad	Grad	Special		

Name: Last First Middle

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Address: Street City County State Zip

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Phone: Daytime Phone # Home Phone #

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Fax Number E-Mail Address

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Course Ref. Number	Course Prefix	Course Number	Course Section	Course Hours	Department Approval	S/U Grade	Batch/Page	Date/Initial

I accept both fee and grade liability.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Total HOURS