

University of Maine Graduate Student Registration Form

* NO GRADUATE SCHOOL CREDIT CAN BE EARNED FOR COURSES NUMBERED BELOW 400.

* TUITION WAIVERS DO NOT COVER AUDIT, PASS/FAIL REGISTRATION, OR COURSES NUMBERED BELOW 400.

* CREDITS ARE BILLED BY STUDENT LEVEL, NOT COURSE LEVEL.

NOTE: PLEASE PROVIDE ALL INFORMATION REQUIRED ON THIS FORM

Name	<input type="text"/>	Student ID	<input type="text"/>	<input type="checkbox"/> Degree	<input type="checkbox"/> Non-Degree	
Address	<input type="text"/>		Phone	<input type="text"/>	Department	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>	
	email					<input type="text"/>
Year	<input type="text"/>	Semester	<input type="text"/>	Status	<input type="text"/>	

Will you be appointed on an assistantship/fellowship in the semester you are registering for?

(Students on assistantships/fellowships must register for 6 credit hours unless doctoral candidate or in semester of graduation)

Course #	Course Designator & Number EX: ZOL 587	Course Name	Section EX: 001	Credit	Day & Time	Class Grade	Instructor's Signature If Required
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Alternate Courses							
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

IMPORTANT: Registrations without a signature will not be processed and will be returned to student/dept. for advisor's approval.

Approved:

Advisor's Signature

Date:

Return to: Graduate School
5755 Stodder Hall, Room 42
Orono, ME 04469-5755
Tel. 581-3291/Fax. 581-3232