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 INFORM	IATION REQUIRED	ON THIS F	ORM				
NAME		MaineStreet I.D.				DEGREE _	NON-DEGREE	
ADDRESS	PHONE E-MAIL							DEPT
YEAR	SEMESTER: Fall	Spring	Summer_		Full Tir	ne	Part-Time	_
	inted on an assistantship/fe tantships/fellowships must re							
Course # EX: 3412	Course Designator & Number EX: ZOL 587	Course Name	e	Section EX: 001	Credit	Day & Time	Grade Audit or P/F	Instructor's Signature If Required
Alternate Courses								
<u> </u> IMPORTANT	: Registrations withou	ıt a signature will	not be pro	cessed and	l will be r	eturned to stu	dent/dept. for	r advisor's approval.
Approved:	e: Return to: Graduate							
Advisor's Signature					5755 Stodder Hall, Room 42 Orono, Maine 04469-5755			

Tel. 581-3219/ Fax 581-3232