THE GEORGE WASHINGTON UNIVERSITY
WASHINGTON, DC

Office of the Registrar
REGISTRATION TRANSACTION FORM
http://registrar.gwu.edu • registrar@gwu.edu

This form must be submitted to your academic advisor or program office for approval. Students should not submit this form to the Registrar's Office.

Semester	Year
☐ Fall	
☑ Spring	2017
☐ Summer	

GWid	LAST NAME	FIRST NAME	EMAIL ADDRESS
G33930932	Shapiro	Joshua	jshapiro314@gwu.edu

ADD

CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE	GRADE MODE*	INSTRUCTOR SIGNATURE
56940	CSCI	4341	10	3	Continuous Algorithms	P	

DROP or WITHDRAW (please circle one)

CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE

TIME CONFLICT APPROVAL
◎ YES   ◉ NO

REPEAT COURSE FOR CREDIT
◎ YES   ◉ NO

*GRADE MODE OPTIONS:
A= AUDIT
C= LETTER GRADE
P= PASS/NO PASS (undergraduates only)
R= CREDIT/NO CREDIT (graduates only)

STUDENT LEVEL
☑ UNDERGRADUATE   ☐ GRADUATE   ☐ OTHER_____

I request the above action be performed.

_____
Student Signature   Date

AUTHORIZED SCHOOL OFFICIAL USE ONLY

☐ Prior to start of the semester   OR   Effective Date: ____ / ____ / ____

Signature: Today's Date:

Note: *This form cannot be used to register for a class that has a waitlist. Students will be added to the waitlist and if offered a seat, must then register through GWeb.*