

**THE GEORGE
WASHINGTON
UNIVERSITY**

WASHINGTON, DC

**Office of the Registrar
REGISTRATION TRANSACTION FORM**
http://registrar.gwu.edu • registration@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
<input type="checkbox"/> Fall	_____
<input checked="" type="checkbox"/> Spring	2017
<input type="checkbox"/> Summer	_____

GWid	LAST NAME	FIRST NAME	EMAIL ADDRESS
G33930832	SHAPIRO	JOSHUA	jshapiro314@gwu.edu

ADD

CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE	GRADE MODE*	INSTRUCTOR SIGNATURE
53659	CSC1	3908	27	2	Research/Independent Study	C	

DROP or WITHDRAW (please circle one)

CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE
56940	CSC1	4341	80	3	Continuous Assessment

STUDENT LEVEL	
<input checked="" type="checkbox"/> UNDERGRADUATE	<input type="checkbox"/> GRADUATE <input type="checkbox"/> OTHER _____

TIME CONFLICT APPROVAL	<input type="checkbox"/> YES <input type="checkbox"/> NO
REPEAT COURSE FOR CREDIT	<input type="checkbox"/> YES <input type="checkbox"/> NO
*GRADE MODE OPTIONS: A= AUDIT C= LETTER GRADE P= PASS/NO PASS (undergraduates only) R= CREDIT/NO CREDIT (graduates only)	

I request the above action be performed.	
<i>Joshua Shapiro</i> Student Signature	7 May 2017 Date

AUTHORIZED SCHOOL OFFICIAL USE ONLY	
<input type="checkbox"/> Prior to start of the semester Signature:	OR Effective Date: ____ / ____ / ____ 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.