

# Western Connecticut State University

## Registration Form



Name: \_\_\_\_\_ WCSU ID: \_\_\_\_\_  
Last First M.

Date of Birth: \_\_\_\_\_

Street Address \_\_\_\_\_

Registration Pin: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Year: \_\_\_\_\_ Semester Fall Spring Winter Intersession Summer  
Summer I Summer II Summer III

Major: \_\_\_\_\_

### Course Registration:

It is your responsibility to know and follow course pre-requisites and corequisites. The Registrar's Office will not register you for a class if you have not met the pre-requisite/co-requisite requirements or have not received prior approval to take the class.

It is important that you contact the Department chair for any course that you do not meet the pre-requisite/co-requisite prior to submitting this form. They will enter the override for you.

Prior approval from the Dean of your school must be given before registering for more than 18 credits. Student will be charged for each credit hour in excess of 18 at the part-time, non-refundable credit fee rate (see the Cashier's website for details.)

	CRN	Subj	Course No	Section	Title
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____
9.	_____	_____	_____	_____	_____

You must save this registration form and email it to the Registrar's Office at [requestregistrar@wcsu.edu](mailto:requestregistrar@wcsu.edu)