

**SPRING 2009
COLLEGE OF EDUCATION
ENROLLMENT WORKSHEET**

Current Student Enrollment Form

*This form is to be left
with your advisor.*

WID NUMBER _____ **NAME** _____

Address _____

() Elementary Education
Area of Concentration _____

() Secondary Education
Major Field _____

PRIMARY REQUESTS							ALTERNATE REQUESTS					
CLASS NUMBER	UNITS	CR. LEVEL	RE-TAKE	SUBJECT & NUMBER	TITLE		CLASS NUMBER	UNITS	CR. LEVEL	RE-TAKE	SUBJECT & NUMBER	TITLE
						A						
						B						
						C						
						D						
						E						
						F						
						G						
						H						
						I						
						J						
TOTAL=		Advisor Signature _____					Date _____					

Time \ Day	7:30	8:05	8:30	9:30	10:30	10:45	11:30	12:30	12:45	1:05	1:30	2:30	3:30	3:45	4:05	4:30	5:30	6:
MONDAY																		
TUESDAY																		
WEDNESDAY																		
THURSDAY																		
FRIDAY																		

Tentative Courses for Summer/Fall 2009

Have you taken the PPST? Yes No

Have you passed all three parts of PPST? Yes No

Notes: _____
