Registration Form PUBLIC HEALTH & PH/GSAS

Fall □	Spring □	Summer \Box	20

Use this form to:

- 1. Plan your schedule and to obtain necessary signatures if the course you wish to register for requires permission.
- 2. When there are no more registration appointment times for any of the following transactions:
 - Add or drop a class
 - Change grading option
 - Replace a course with a new section
- 3. The following Action Codes are needed to complete the form:
 - 1 to add a class
 - 2 to drop a class
 - 3 to register for a class pass/fail
 - 4 to change pass/fail to letter grade
 - 5 to replace a course with a new section

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Action Call Number Code			Course Number, Name and Section	Approval as Required	Point (s)			
1	5	4	3	2	1	P0000 Introduction to Public Health Sec 01	Division/Instructor	0.0

Student Signature	Term Program Approved By	Date			
		versity you must: 1) Obtain their signed approval, Vest 168 th Street, Room 1-141, during the Change			
I certify this student although registered for examinations, supervised field work, essay or d		requirements (either coursework, preparation for _half-time program of study.			
Certified by Advisor:	Student signature*				
*Students registered or certified full-time will be billed the Student Health Services fee. For waiver of hospitalization portion coverage, rebate program, etc., contact Student Health Services at 212-305-3400, 60 Haven Ave, #3E. Students registered half-time can have student loans deferred but will not be eligible for University housing and may not be "in status" if they hold and F-1 or J-1 student visa (exemptions made for final term of study).					
PRESENT THIS FORM IN PERSON with s no later than end of Change of Program peri		s (Registrar), 650 West 168 th Street, Room 1-141,			

STUDENTS LEAVE A COPY OF YOUR FINAL PROGRAM WITH YOUR DEPARTMENT