

## **UNDERGRADUATE COURSE REGISTRATION**

74 WYLLYS AVENUE MIDDLETOWN, CT 06459

GLSP Office Use Only

Registered, date/initials:

Payment required for GLS summer term only

PERSONAL INFORM	NOITAN		
Wesleyan ID#:		Email:	
Name:		Phone:	
REQUEST TO REGIS	STER FOR A GLS COU	RSE	
Course number:		Term:	
Course title:			
Student signature:		Date:	
I am a Wesleyan University		oproval to register for the above GLS c	
am a Wesleyan University undergraduate degree. I he policies which are different Studies Student Handbook	ave read, understand, and aging the from those of my undergrade and am aware of any differer fures (Student is response)	ree to abide by the GLS withdrawal dec uate program. I have read and underst	adline, financial terms, and cood the Graduate Liberal
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Add/Drop sent to Registrar-Date:

Confirmation sent:

Payment details: