

WESLEYAN
GRADUATE
LIBERAL STUDIES

74 WYLLYS AVENUE
MIDDLETOWN, CT 06459

UNDERGRADUATE COURSE REGISTRATION

PERSONAL INFORMATION

Wesleyan ID#: _____ Email: _____

Name: _____ Phone: _____

REQUEST TO REGISTER FOR A GLS COURSE

Course number: _____ Term: _____

Course title: _____

Student signature: _____ Date: _____

I am a Wesleyan University junior or senior requesting approval to register for the above GLS course for credit toward my undergraduate degree. I have read, understand, and agree to abide by the GLS withdrawal deadline, financial terms, and policies which are different from those of my undergraduate program. I have read and understood the Graduate Liberal Studies Student Handbook and am aware of any differences in policy.

APPROVAL SIGNATURES (Student is responsible for obtaining all signatures)

GLS course instructor: _____
print name signature date

Student's major advisor: _____
print name signature date

Student's class dean: _____
print name signature date

GLS Director: _____
print name signature date

GLSP Office Use Only	Add/Drop sent to Registrar-Date:
Registered, date/initials:	Confirmation sent:
Payment required for GLS summer term only	Payment details: