



Course Registration

Submit completed form through your student email to ccadmissions@yosemite.edu.
Forms will **NOT** be accepted prior to your registration date and time. Please include any approved petitions that you may need in order to be registered.

Today's Date: _____

Student Information

First Name: _____ Middle Initial: _____ Last Name: _____

Student ID: w _____ Birthdate: _____ Phone Number: _____

Course Information

Term/Year: Fall _____ Spring _____ Summer _____

Section #	Course Name & Number	Access Code	Refund Date	Census Date
4040	CART-1	1234	08/27/2020	Office Use Only

Student Signature: _____ Date: _____

OFFICE USE ONLY

Registered by: _____ Date: _____ ID Verified

- Pre-Requisite/Co-Requisite
 Time Conflict
 H.S. Max 10%
 MXW
 3rd Enrollment
 Student Petition
 Grade Improvement
 STAC

Comments: _____