GRADUATE PRE-REGISTRATION GRID SHEET

Form Instructions Student: Please fill out the form and forward it to your advisor. Advisor: Please forward the completed form to mathoffice@binghamton.edu with your approval. If you don't approve, notify the student. B#: _____ Name: ____ Date: _____ E-Mail: ____ Program: MA/PhD MA in Statistics Year: Semester: Fall Spring Summer Course: Math Credits: Action to be taken: Add Change Drop Course: Math ____ Credits: ____ Action to be taken: ___Add ___Change ___Drop Course: Math Credits: Action to be taken: Add Change Drop If taking an Independent Study, is it: A Course (provide course #) or Research # of Credits: Instructor of Independent Study: Advisor Use Only Advisor Approval: Yes No Date: Advisor Name

Math Office Use Only

Date registered