

HAVERFORD

Office of the Registrar

REGISTRATION FOR SWARTHMORE/UNIVERSITY OF PENNSYLVANIA COURSES

NAME: _____ ID: _____ CLASS: _____

SWARTHMORE

I would like to register for the following course(s) at **SWARTHMORE** for the Fall/Spring 20____ semester.

DEPT	NUMBER	COURSE TITLE	FACULTY	CREDIT

Approved: _____
Student's Advisor Date

UNIVERSITY OF PENNSYLVANIA

I would like to register for the following course(s) at **PENN** for the Fall/Spring 20____ semester.

I understand that permission will only be granted for Penn courses that are offered through the School of Arts and Sciences, that a maximum of 2.0 courses per semester is the limit, that courses will **not** be approved if they are being offered either at Haverford or Bryn Mawr, and that Elementary Foreign Languages must be taken for a full year (both semesters) for credit to be granted for either semester.

DEPT	NUMBER	COURSE TITLE	FACULTY	CREDIT

Approved: _____
Student's Advisor Date

Approved: _____
Registrar (**Necessary for Penn courses only**) Date

Student's Signature Date

Complete the above information, then print this page.
Return **SIGNED** copy to the Office of the Registrar.
For UPenn Courses - Also return the UPenn Registration form.