

# Special Studies/Advanced Studies Registration Supplement

Smith College, Office of the Registrar, College Hall 102, ext.2561

Please Note: Submission of this form to the Registrar indicates that the course has been approved by the adviser.

Name: \_\_\_\_\_ ID# 990 \_\_\_\_\_ Ext. or \_\_\_\_\_ Class YR \_\_\_\_\_  
Phone \_\_\_\_\_  Undergrad  Grad

Only 30 spaces will fit on your transcript. Please fill in shortened title below:  
-----

Write full title below, if different from shorter title:  
\_\_\_\_\_

Subj. / Course # \_\_\_\_\_ / \_\_\_\_\_ # of Credits \_\_\_\_\_ Term: \_\_\_ Fall \_\_\_ Spring \_\_\_ Yearlong (408D)  
(You may register only for those departmental options listed in the catalog.)

**This section for Grad students only: (Graduate students should submit this form to the Graduate Programs Office)**

Will this 400 or 500 level Special Studies/Advanced Studies also include participation in any undergraduate level course?

yes  no If yes, please provide: Dept. / Course # \_\_\_\_\_ CRN # \_\_\_\_\_

Should a self-scheduled exam be prepared for him/her?  yes  no

Instructor (print) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dept. Chair (print) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please see reverse side for further instruction regarding your special studies.

8/07

# Special Studies/Advanced Studies Registration Supplement

Smith College, Office of the Registrar, College Hall 102, ext.2561

Please Note: Submission of this form to the Registrar indicates that the course has been approved by the adviser.

Name: \_\_\_\_\_ ID# 990 \_\_\_\_\_ Ext. or \_\_\_\_\_ Class YR \_\_\_\_\_  
Phone \_\_\_\_\_  Undergrad  Grad

Only 30 spaces will fit on your transcript. Please fill in shortened title below:  
-----

Write full title below, if different from shorter title:  
\_\_\_\_\_

Subj. / Course # \_\_\_\_\_ / \_\_\_\_\_ # of Credits \_\_\_\_\_ Term: \_\_\_ Fall \_\_\_ Spring \_\_\_ Yearlong(408D)  
(You may register only for those departmental options listed in the catalog.)

**This section for Grad students only: (Graduate students should submit this form to the Graduate Programs Office)**

Will this 400 or 500 level Special Studies/Advanced Studies also include participation in any undergraduate level course?

yes  no If yes, please provide: Dept. / Course # \_\_\_\_\_ CRN # \_\_\_\_\_

Should a self-scheduled exam be prepared for him/her?  yes  no

Instructor (print) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dept. Chair (print) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please see reverse side for further instruction regarding your special studies.

8/07