



Pre-Registration Form

Name: _____

SU Id Number: _____

Major/Career Interest: _____

Exchange Program: _____

Semester(s) of Academics: Fall _____ Spring _____

Instructions: Please view the courses offered the semester(s) you are taking academic classes. Be sure to select the correct term in the course section search. In the spaces below, please list the courses (course registration numbers and titles) that you are interested in taking by order of preference. Once you complete the form, send it to jlbeck@samford.edu. You will be contacted if there are further questions regarding your course selection. During orientation, your advisor will review your course schedule and make any necessary changes.

	CRN	Course Title
Ex.	71051	FOUN 101 – Foundations: Global Engagement
1		
2		
3		
4		
5		
6		
7		
8		