

# CLARK ATLANTA UNIVERSITY

## WEB REGISTRATION FORM

Registration PIN: \_\_\_\_\_

SEMESTER: \_\_\_\_\_ YEAR: \_\_\_\_\_

NAME: \_\_\_\_\_ ID# 900 \_\_\_\_\_  
LAST FIRST MIDDLE

CRN	SUBJECT	COURSE	SECT.	COURSE TITLE	DAY(S)	TIME	CREDIT HRS.
<b>TOTAL CREDIT HOURS:</b>							

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Advisor's Signature