



Name Last First

Student ID

Date

Term and Year

TAFT COLLEGE ADD CLASS REGISTRATION FORM

| (CRN) Course Registration # | Subject | Course # | Section | Title | Instructor | Units |
|-----------------------------|---------|----------|---------|-------|------------|-------|
| | | | | | | |

Student's Signature _____

*Instructors Signature _____ Date _____

For Office Use Only:

| |
|---|
| Section Change: _____ Add entered _____ as of _____ Reinstatement by Instructpr as of _____ |
|---|

Advisor's Signature _____

**Note: Add slip will not be processed until student has satisfied any prerequisites for the course.*

Revised 6/16 (aa)



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