

Indiana University  
Informatics  
School of Informatics, Computing, and Engineering

**Course Registration, Substitution, or Exception Form**

Student's Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Student's Email: \_\_\_\_\_

Program/Track: \_\_\_\_\_ Advisor's Name: \_\_\_\_\_

Registration Term and Year (i.e. Fall 2017) \_\_\_\_\_

I am registering for an on-campus section. \_\_\_\_\_

I am registering for an off-campus section as I am living in: \_\_\_\_\_  
(City, State, Country) \_\_\_\_\_

Course No.	Section No.	Course Name	Credit Hrs.	For Ph.D. Students Only: Fulfills the Requirement:

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Approved by**

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I am enrolling in less than 8 cr. this semester, seeking a justification, or substitution, etc., requires a justification and the approval of the Director of Graduate Studies, Informatics is required. \_\_\_\_\_

**Approved by**

Director of Graduate Studies, Informatics Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit completed form to the Informatics Graduate Studies Office.**