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| Statement of Student Responsibility |

It is the student's responsibility verify that their planned courses meet degree requirements.  The purpose of pre-registration advising is to help students make informed decisions about course selection and course load.  This does not relieve the student from their responsibilities.

Please sign below acknowledging your understanding of, and agreement to, this statement.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Today’s Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Student Information |

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Student ID number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **E-mail**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@ncsu.edu

**Current Major(s)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Current Minor(s)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Class: FR SO JR SR Other Expected Graduation (if known)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Will you be working a job?** No Yes **--** if yes: on campus off campus number of hours per week: \_\_\_\_\_\_\_\_

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| All Courses in Which You Plan To Register During the Next Semester(s) |

|  |  |  |
| --- | --- | --- |
| **Semester**:Spring Fall  **Year**: **20\_\_\_\_\_\_\_\_\_**  **Please put course prefix and number.**  **Ex: CSC 116** | **Course** | **Credit Hours** |
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|  |  |
| **TOTAL HOURS FOR SEMESTER:** |  |
| **Summer Year: 20\_\_\_\_\_** | **Course** | **Credit Hours** |
| 10 wk Maymester (3 wk)  Summer I (5 wk) |  |  |
| 10 wk  Summer I (5 wk) |  |  |
| 10 wk  Summer I (5 wk) |  |  |
| Summer II (5 wk) |  |  |
| Summer II (5 wk) |  |  |
| Summer II (5 wk) |  |  |
|  | **TOTAL HOURS FOR SUMMER:** |  |

**My individual enrollment appointment begins: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (month, date, time)**

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| Additional Notes |

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