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Please fill in completely.

Student Name:_____ Please Circle term F W Sp Su Sp/Su

UM ID: ___ ___ ___ ___ - ___ ___ ___ ___ Phone:_____ E-Mail:_____

Subject Area	**Catalog #**	**Section #**			**Instructor's Signature**
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
sample: NRE	100	001	002	003	*Dr. Witter*

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