

FSU College of Medicine Graduate Course Registration Form (rev. 6/27/17)

*Instructions: This form is to be completed for registration **each semester** by all students in the Program in Biomedical Sciences. Students in other Colleges who wish to register for graduate courses in the College of Medicine should also complete this form.*

First year graduate students must register for all required courses listed in the Student Handbook. This form must be signed by the Director of the Graduate Program.

Second and successive year students should consult with their Major Professor on recommended course selection and recommendations by their Supervisory Committee. All students must follow the departmental requirements in the Student Handbook. The form must be signed by your Major Professor.

Registration is via the FSU online registration system. After you have registered, the completed and signed form is to be submitted to the BIOMED Graduate Office, 2370-H MSR.

Student Name: _____ **Date:** _____

Term of Registration (circle/highlight): *Fall* *Spring* *Summer* **Year:** _____

FSU ID (i.e., abc25) or Empl ID 111223333): _____

Courses for which you want to be registered: (i.e., class code 8179, course code BMS5905-01 DIS)	Credit Hours	Instructor
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Major Professor or Graduate Program Director

Date

Program/Departmental Authorization

Date
