Bard Graduate Center

Decorative Arts, Design History, Material Culture

Course Registration Form

Academic Programs Office

PLEASE NOTE: Proposal forms for an independent study or consortium course should be obtained from the Academic Programs Office. The Graduate Committee must approve proposals before the start of the next semester.

Year: _____

(*check one*) ☐ Fall Term ☐ Spring Term

(*check one*) ☐ MA ☐ PhD (*check one*) ☐ Full-time ☐ Part-time

Student Name | ID Number | Advisor Name

Year Entered | Number of Credits Earned to Date | Email Address

COURSE REGISTRATION

Course Number	Course Title	Day/Time	Credits
Course Number	Course Title	Day/Time	Credits
Course Number	Course Title	Day/Time	Credits
Course Number	Course Title	Day/Time	Credits
Course Number	Course Title	Day/Time	Credits
Course Number	Course Title	Day/Time	Credits
Course Number	Course Title	Day/Time	Credits

Student Signature | Date

Advisor Signature | Date

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