

AL Buraimi College (University College)
Admission and Registration Department
Course Registration Form



Student Name : ID.No :
 Department : Major : Level:
 Semester : Academic Year : / /

Course Code	Course Name	Section	Credit Hours	Room	SAT	SUN	MON	TUE	WED

Registrar Use	Registrar Signature and Stamp	Signature and Stamp of Financial Department
- No of earned credit hours : - No of Cr.Hr,s To be registered in the following semester . - No. of Cr. Hr.s registered in the current Semester.		

Alternative Courses (descending according to importance) :-

Course Code	Course Name	Section	Credit Hours	Room	SAT	SUN	MON	TUE	WED

Student Signature :

Academic Advisor Name and Signature : Date:

Registrar Name and Signature :

Notes : It is student's responsibility to :-

- Register in the particular above mentioned courses .
- Accord the data in this form with study time – tables (including course codes sections number and time of lectures) .

- ١- نسخة المسجل
- ٢- نسخة المرشد
- ٣- نسخة الطالب
- ٤- نسخة المالية