



FORM GSBS40: MANUAL REGISTRATION

Student Name	Signature	Date	Term

Semester: Early Fall Fall Spring Summer

If course will be audited – complete “Credits” section as AUD

Class #	Course Number & Course Name	Credits	Course Director	Director Initials

FOR

PREVIEW

ONLY

For GSBS Office Use

PSSA EMPLID:

GSBS Staff:

Date:

Distribution: All signers, Registrar, Bursar