



Selma University
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 ENTERED IN EDC
 BY:
 DATE:

Email: registrar@selmau.edu or c.washington@selmau.edu

New Student _____ Returning Student _____ Auditing Student _____

COURSE REGISTRATION FORM

Student ID: _____ Course Term: Spring Fall Summer 20_____

Name: _____ Date: _____

Address: _____ City: _____ St: _____ Zip: _____

Phone: _____ Email: _____

ACADEMIC MAJOR (CHECK ONE)

Associate of Arts Degree

___ Bible and Theology

Bachelor of Arts Degree

- ___ Bible and Pastoral Ministry
- ___ Bible, Theology and Christian Ed.
- ___ Business Administration
- ___ General Studies

Master of Arts Degree

- ___ Bible and Christian Education
- ___ Bible and Pastoral Ministry

Associate of Health Science Degree

___ Patient Care Technology

Bachelor of Science Degree

- ___ Biology
- ___ Biology with Health Science Emphasis
- ___ Biology with Physical Education Emphasis

COURSE NUMBER	SECT. #	TITLE OF COURSE	CR. HRS.	DAYS	TIME	INSTRUCTOR	ROOM/VIRTUAL

Student Signature _____

Faculty Advisor Signature _____

Selma University is committed to the principles of equal education, equal access, and equal employment opportunities without regard to race, Color, marital status, sex, religion, national origin, disability, age, or disabled veteran status provided by law and in accordance with the University's respect for personal dignity. These principles are applied in the conduct of university programs and activities and the provisions of facilities and services.