

# TELE-BEARS FORM

Fall  Spring 20\_\_\_\_ Semester

Name: \_\_\_\_\_ SID#: \_\_\_\_\_

Major: \_\_\_\_\_ Major Advisor: \_\_\_\_\_

Local Address: \_\_\_\_\_

Local Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

## Tentative Class Schedule

Course Control Number	Department & Course Number (e.g., English 1A)	Section	Units	Grading Option
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>
				Letter Grade <input type="checkbox"/> P/NP <input type="checkbox"/>

Do you expect to graduate at the end this term? Yes  No   
Checking "Yes" will place you on the degree list.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Major Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: Major advisor's signature required for all students.

## See Schedule of Classes for Tele-BEARS Instructions.

### FOR OFFICE USE ONLY

AC Code: \_\_\_\_\_ Processed By: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_