NOVA COURSE REGISTRATION FORM **TERM/YEAR**_____ **TODAY'S DATE** _____

Name_____ ID # _____
NOVA Advisor: _____Major: _____

Contact Hours: _____ Contact Type(s): _____

Major Advisor: _____ **RAC #** _____

TIME	M	W	F	TIME	T	R
8:00				8:00		
9:05				9:30		
10:10				11:00		
11:15				12:30		
12:20				2:00		
1:25				3:30		
2:30						
3:35						
4:40						
6:00			**XXXX**			

COURSE REGISTRATION NUMBER	DEPART.	COURSE NUMBER	HOURS	COMMENTS

COMMENTS:

_____ _____
NOVA Advisor Signature **Student Signature**

Revised 2013 SJH