



**RETURN SEMESTER  
COURSE REGISTRATION FORM**

**DRAKE UNIVERSITY**

NAME \_\_\_\_\_ STUDENT ID# \_\_\_\_\_  
(Please Print)

AS    CBPA    ED    JMC    CPHS    LAW    MAJOR \_\_\_\_\_  
(Please circle appropriate college) (Please print)

TERM RETURNING TO DRAKE:  Fall \_\_\_\_\_  Spring \_\_\_\_\_  Summer \_\_\_\_\_  J-term \_\_\_\_\_

**Student:** Only complete this side of the form if you will be abroad for a semester, as course registration will happen while you are abroad. List five to ten courses you would prefer to take during the semester you return to Drake. Discuss your proposed schedule with your academic advisor. Upon completion of this form, your college/school dean’s office will email the form to you, your advisor, and the study abroad office.

**REGISTRATION CONTACTS:**

A&S: Science	Alina Grimm	alina.grimm@drake.edu
A&S: Humanities, Social Science & Fine Arts	Mary Beth Holtey	marybeth.holtey@drake.edu
Business	Karen Pomeroy	karen.pomeroy@drake.edu
Education	Carmalee Woods	carmalee.wood@drake.edu
Journalism	Mallory Quinn	mallory.quinn@drake.edu
CPHS: Health Sciences, Pre-OT, Pre-AT	Jill Batten	jill.batten@drake.edu
CPHS: Pre-Pharmacy, Pharmacy	Sydni Jennings	sydni.jennings@drake.edu
Office of the Registrar	Kevin Moenkhaus	kevin.moenkhaus@drake.edu
International Center	Karen Williams	karen.williams@drake.edu

**PREFERRED COURSES TO TAKE UPON MY RETURN TO DRAKE:**

(Use a separate sheet of paper if additional room is needed)

<u>Subject and Course #</u>	<u>Course Title</u>	<u>Required</u>	<u>Elective</u>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

**\*Students are advised to contact their college/school dean's office prior to the registration period of their return semester to Drake to ensure the accuracy of all registration-related procedures and deadlines.**

Total Credit Hours Desired for Return Semester: \_\_\_\_\_

**SUBMIT SIGNED FORM TO YOUR COLLEGE/SCHOOL DEAN’S OFFICE**