EASTERN NEW MEXICO UNIVERSITY

www.enmu.edu

Registration Form

Office of the Registrar • ENMU Station 5 • 1500 S. Ave. K
Portales, NM 88130 • Fax: 575-562-2566

❑ Fall 20_____
❑ Spring 20_____
❑ Summer 20_____

Personal Information

ENMU ID: _____ **SSN:** _____

Student's name: _____
Last First Middle initial

Local Address: _____
Address City State ZIP

Course Information

Note: If you wish to audit a class place, "NC" in the credit hours column. List required labs and/or concurrent courses immediatly below the corresponding lecture class.

CRN Code	Department Abbreviation	Course Number	Section Number	Credit Hours	Days	Hours	Office Use
Example: 20541	Math	107P	001	3	MWF	8–8:50	

Approvals and Signatures

Total hours: _____ **Student signature:** _____ **Date:** _____

Dean's overload approval: _____ **Advisor**: _____