

# On-Line or Guided/Self-Directed Study Course Work Only

## Registration for Approval for On-Campus Admitted Students

Requesting Permission to register for:

Course Name, Number, Course ID#:

\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Indicate Term Desired:

\_\_\_\_ Fall \_\_\_\_ Spring \_\_\_\_ Summer

Will you be enrolled in on-campus (face-to-face)  
classes this term? \_\_\_\_ How many credits? \_\_\_\_

Status: Full Time \_\_\_\_ Part time \_\_\_\_

Number of Credits completed to date: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Phone: \_\_\_\_\_

BSU ID# \_\_\_\_\_

STATUS: (check one)

FR. \_\_\_\_ SO. \_\_\_\_ JR. \_\_\_\_ SR. \_\_\_\_ GRAD \_\_\_\_

**Please indicate why you are requesting to take this On-Line or Guided/Self Directed Study course instead of attending an on-campus course: Check all that apply:**

\_\_\_\_ Internship/Student Teaching/Study

\_\_\_\_ Health problems

\_\_\_\_ Course Schedule Conflict

\_\_\_\_ Planning to graduate within one semester

\_\_\_\_ Athletic team or practice schedule

\_\_\_\_ I prefer the online or guided/self directed courses to on-campus courses.

\_\_\_\_ Distance from BSU Campus - How Far? (miles) \_\_\_\_\_

\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_ Course is not offered on campus now

\_\_\_\_ Employed \_\_\_\_ hours per week

\_\_\_\_ Work Schedule Conflict

\_\_\_\_ Child care responsibilities

\_\_\_\_ Personal/Family Crisis

What is your major: \_\_\_\_\_

What is your minor: \_\_\_\_\_

If you are a Psychology major, **including this term**, how many **guided/self-directed or online** Psychology courses will you have taken: \_\_\_\_\_ Have you taken, or do you plan to take, Psychology class at the Arrowhead University Center in Hibbing? \_\_\_\_ Yes \_\_\_\_ No

Date: \_\_\_\_\_

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

**CEL Credits Are Not Included In The Tuition Band**

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

\_\_\_\_ Instructor: \_\_\_\_\_

\_\_\_\_ Department Chair: \_\_\_\_\_

\_\_\_\_ Division Dean: \_\_\_\_\_  
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**UPON APPROPRIATE APPROVAL, CEL STAFF WILL REGISTER FOR YOU.**