# JuniataLogo06 blackEXCHANGE STUDENT

# PRE-REGISTRATION FORM

Type:

ID#

Office Use Only

Please direct any questions to International@juniata.edu

*Complete this form electronically, save and send to* *international@juniata.edu*

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|  **First Name: Middle Initial:** **Last Name:**  |
| **Permanent Address:** |
| **Home Institution:**  |
| **Email Address: Area of Study:**  |
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**SEMESTER ONE**  **20\_\_**

**COURSE REGISTRATION**

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| **Dept.** | **Cat. No** | **Section** | **Title** | **Class Days** | **Class Time**  | **Credits** |
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**Total Credits:**

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**SEMESTER TWO**  **20\_\_**

**COURSE REGISTRATION**

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| **Dept.** | **Cat. No** | **Section** | **Title** | **Class Days** | **Class Time**  | **Credits** |
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***LIST ALTERNATE COURSES BELOW***

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| **Dept.** | **Cat. No** | **Section** | **Title** | **Class Days** | **Class Time**  | **Credits** |
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