



## OFFICE OF THE REGISTRAR

## Undergraduate Summer Registration Form

Registration for Term: SUMMER 20\_\_\_\_\_

Legal Name \_\_\_\_\_ YU ID # \_\_\_\_\_  
FIRST MIDDLE LAST STARTS WITH # 800 OR 999

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

School Attending:  KATZ  SCW  SSSB  YC

Current Class:  FR  SO  JR  SR Major \_\_\_\_\_ Minor \_\_\_\_\_

To make corrections, please cross out the entire line and rewrite. X out unused lines.

Line #	CRN	Dept.	Course #	Section	Credits	Special Notes/Dean or Advisor signature as needed in the rows below
1						
2						
3						
4						
5						
6						
7						
8						

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE OF THE REGISTRAR

Registered by \_\_\_\_\_ Date \_\_\_\_\_

To automatically attach this PDF to your email, please select your campus registrar:

- Beren Campus:** 215 Lexington Avenue, 6th Floor, New York, NY 10016 | P: 646.592.4180 | F: 212.340.7837 | E: berenregistrar@yu.edu
- Wilf Campus:** 500 West 185 Street, Room 114, New York, NY 10033 | P: 646.592.6270 | F: 212.960.0004 | E: wilfregistrar@yu.edu