



Course Registration

Student's Name: _____

Student ID#: _____ Semester: _____

Major(s): _____

Minor(s): _____

Advisor's Name: **Debora Wilhite** _____

Session A

Session B

Course Name:

Course Name:

Course Name:

Course Name:

Course Name:

Course Name:

Alternate Course #1:

Alternate Course #1:

Note: After your initial registration, you can make adjustments to your schedule through the [Portal](#). You can also change your schedule upon your arrival, if needed. You may request syllabi from Debora Wilhite (wilhitda@grace.edu) ahead of time.