

Office of Records & Registration, SUNY New Paltz, 500 Hawk Drive, New Paltz, NY 12561-2439

Fall Spring Summer I Summer II 20____

Please type or print:

Last Name _____	First _____	MI _____	Student ID Number <table border="1" style="display:inline-table; border-collapse: collapse;"><tr><td style="width:15px; text-align:center">N</td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td></tr></table>	N									
N													
Local Address: Street _____		Apt. No. _____	E-mail _____										
City _____	State _____	Zip Code _____	Telephone Number (____) _____										

Course Number _____ Abbreviated title of study _____ Credits* _____
** Credits vary from one program to another and students should check the College catalog for credit permitted.*

AFFIRMATION OF CHARGES:

I, _____, have read SUNY New Paltz's graduate student Continued Registration policy (http://www.newpaltz.edu/graduate/cont_reg_affirmation_of_charges_form_final_11.9.10.pdf).

I understand that:

- if I register for Comprehensive Exam Preparation (XXX599) and fail to complete the exam at the end of the semester, or
- if I receive an H grade in a Thesis course, but I've completed my other course work required for my degree, I will be automatically registered for one credit of Continued Registration each fall and spring semester until I either submit my thesis for a grade or pass the comprehensive exam for my graduate program. Furthermore, I understand that I am responsible for payment of Continued Registration tuition and fees.

_____	Date _____	Student ID Number <table border="1" style="display:inline-table; border-collapse: collapse;"><tr><td style="width:15px; text-align:center">N</td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td></tr></table>	N										Major _____
N													

Please make sure the following are attached before submitting this form to Records and Registration

- 1 – Brief prospectus for thesis
- 2 – Unofficial transcript

RECOMMENDED BY:

Please PRINT Instructor's name _____	Instructor ID Number <table border="1" style="display:inline-table; border-collapse: collapse;"><tr><td style="width:15px; text-align:center">N</td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td><td style="width:15px;"></td></tr></table>	N									
N											

Signature of Student _____ Date _____

Signature of Instructor _____ Date _____

Signature of Department Chair _____ Date _____