

SEMINAR APPLICATION

Unless instructed otherwise, please complete this form in its entirety and submit it to the Scheduling Coordinator in the Psychology Student Services Office, 3305 Tolman.

Course #: _____ Instructor: _____

Seminar Title: _____ Semester: _____

Applicant's Name: _____ Phone: _____

Major: _____ Email: _____

Units completed (overall): _____ GPA: _____

Please indicate why you want to enroll in this seminar:

List previous Psychology courses with grades:

List courses completed in other departments relevant to this seminar:
