

**ANT 397 CONFERENCE COURSE  
REGISTRATION FORM**

*Return **completed and signed** form to the Graduate Coordinator.*

**Semester/Year for Course:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **EID:** \_\_\_\_\_

**E-mail :** (please print) \_\_\_\_\_

*Please remember one form per conference course.*

**UNIQUE number:** \_\_\_\_\_

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**How will this course be graded?** (Please circle one.)      **Credit/No Credit** *or* **Letter Grade**

Describe the topic, goals, and requirements of the course:

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The above named student has my permission to register for this conference course with me.

\_\_\_\_\_  
**Supervising Faculty Signature**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Date**