



GEORGETOWN UNIVERSITY
GRADUATE SCHOOL OF ARTS & SCIENCES

Tutorial Registration

Name: _____ Student ID: _____
 Degree: _____ Major: _____
 Semester: _____

ADD			
COURSE: DEPT – NUMBER – SECTION		CREDITS:	TITLE:
- -			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Research Tutorial	Reading Tutorial	Extra Credit/Internship	Graduate Credit for Undergraduate Course below 350

Course Description:

Texts or Bibliography:

Schedule of meetings with student:

Assignments or Nature of Research:

Examinations or Papers:

Instructor Name:

Instructor Signature:

Director of Graduate Studies:

Graduate School:

Date:

Date:

Date: