



CLAREMONT MCKENNA COLLEGE

REGISTRATION WORKSHEET

(Please obtain registration clearance from your advisor well in advance of your registration appointment.)

STUDENT ID: _____ Name: _____

Major: _____

Double Major: _____

Dual Major: _____

Sequence: _____

Anticipated Grad Session/Year: _____ **Class:** _____

Preferred Courses

Course Number and College	Section #	Days	Time	Instructor

Alternative/Additional Courses
