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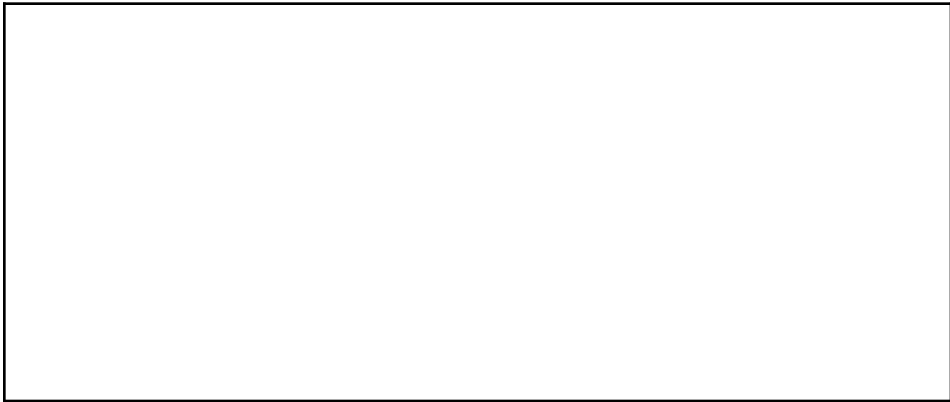








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[Submission deadline posted online](#)

Last		First		Middle		ID Number	
Street Address				City	State	Zip	Email
Phone No.				Birth date			

**Course(s) in which you wish to enroll:**

1.	_____		_____	
	Dept/No.	Title	Units	Instructor Signature
2.	_____		_____	
	Dept/No.	Title	Units	Instructor Signature
3.	_____		_____	
	Dept/No.	Title	Units	Instructor Signature

To enroll in a summer independent study this form must be accompanied by an Independent Study Contract.

To enroll in a summer internship, please go to the Hameetman Career Center (HCC) for approval. The HCC is located in the AGC, Room 109.

_____	_____
Student Signature	Date
_____	_____
Student Accounts Office Signature	Date
_____	_____
Registrar Signature	Date