

CONTINUOUS ENROLLMENT FORM GRAD 799

NAME _____ STUDENT ID _____

ADDRESS: _____

RADFORD EMAIL ADDRESS: _____

TELEPHONE NO: _____

MAJOR: Choose an item. _____

Reason for enrollment into GRAD 799: (Please check all that applies)

Have an "I" or "IP" Grade

Please list the course(s) and the original term of registration _____

Expected Semester of Completion of "I" or "IP" Grade _____

Must complete final Comprehensive Exam

Expected semester of Completion of Comp Exam _____

Must complete final Dissertation Defense

Expected semester of Completion of Dissertation Defense _____

Must complete final Thesis Defense

Expected semester of Completion of Thesis Defense _____

Must complete final Recital

Expected semester of Completion of Recital _____

Must complete Thesis or Dissertation and submit to the library

Expected semester of Completion of submission of final Thesis or Dissertation _____

Other Requirements (Please list) _____

Expected semester of Other Requirements _____

EXPECTED SEMESTER OF COMPLETION OF DEGREE _____

SEMESTER FOR ENROLLMENT (GRAD 799): _____

APPROVALS:

Advisor Date

Dean, College of Graduate Studies and Research Date

Submit form to Graduate College. Graduate College sends form to Registrar. Registrar's Office enrolls student in Grad 799. Must pay \$50.00 enrollment fee. This may be done with Students Accounts.