SCHOOL OF
PUBLIC HEALTH

PART I: STUDENT INFORMATION

Student Name: _____ _____ **ID Number**: _____

Program of Study: _____

The above student requests permission to enroll in the course listed below during the _____ term. The course should be applied to the student's degree requirements as indicated.

PART II: COURSE INFORMATION

Requested Course List course subject code, number, and title *(example: PHPM 524 Intro to Biostatistics)*	**Credit Hrs** *(ex: 3)*	**Apply to** List degree requirement course fulfills, or specify "elective" *(example: "Area or Emphasis" or "Elective")*

PART III: APPROVALS

Course Instructor
(not required for courses offered by the School of Public Health)

Signature

Date

Program Director*/ Faculty Advisor**
(not required for courses listed on the approved program of study—consult your handbook)

Signature

Date

*For students in the following programs: Certif Public Health, Certif Biostats, MS Biostats, MPH Biostats, MS Biostats, MPH Env. Systems & Human Health, MPH Epidemiology, MPH Primary Hlthcare & Health Disparities, PhD Epidemiology

**For students in the following programs: MPH Health Promotion, MPH Hlth Mgmt & Policy, PhD Community Health, and PhD Health Systems & Policy

Submit this form as an attachment to sphregistration@ohsu.edu.
Please use the subject line "Registration Request [Course Name], [Your Name]"

INSTRUCTIONS

1. Enter complete course information into the Registration Request form.
2. Obtain approval signatures, if required – refer to the chart below. Electronic signatures are preferred.
3. Submit your form as an attachment to sphregistration@ohsu.edu.
   Please use subject line Special Registration Request: [Course Name], [Your Name].
4. You will receive confirmation that your request has been received.
5. Submitting a request does not guarantee enrollment. Your request will be reviewed. If it is approved, you will either be registered for the course by staff, or you will receive instructions on how to complete registration yourself.

SPH Registration Guide		I register through OHSU's SIS, and my program is…		I register through PSU's Banweb, and my program is…
		Certif Public Health Certif Biostats MS Biostats MPH Biostats MPH Env Systems & HH MPH Epidemiology MPH Prim. Hlthc & Hlth Disp. PhD Epidemiology	MPH Health Promotion MPH Hlth Mgmnt & Policy PhD Community Health PhD Health Syst. & Policy	MA/MS Hlth Studies MPH Health Promotion MPH Hlth Mgmnt & Policy PhD Community Health PhD Health Syst. & Policy
The course I want to register for is…	SPH Course offered by OHSU	Regular registration Do not submit form	Regular registration Do not submit form	Special Registration submit form No signatures required
	Non-SPH Course offered by OHSU	Special Registration submit form Signatures required: • course instructor • program director, *unless the course is part of your program's pre-approved program of study.*	Special Registration submit form Signatures required: • course instructor • faculty advisor, *unless the course is part of your program's pre-approved program of study.*	Special Registration submit form Signatures required: • course instructor • faculty advisor, *unless the course is part of your program's pre-approved program of study.*
	Non-SPH course offered by PSU	Special Registration submit form Signatures required: • course instructor • program director, *unless the course is part of your program's pre-approved program of study.*	Special Registration submit form Signatures required: • course instructor • faculty advisor, *unless the course is part of your program's pre-approved program of study.*	Regular registration Do not submit form
	SPH course offered by PSU	Regular registration Do not submit form	Regular registration Do not submit form	Regular registration Do not submit form

Submit this form as an attachment to sphregistration@ohsu.edu.
Please use the subject line "Registration Request [Course Name], [Your Name]"