



PART I: STUDENT INFORMATION

Student Name: _____

PSU ID Number: _____

Academic Program: _____

OHSU ID Number: _____

PART II: COURSE INFORMATION

Requested Course List course subject code, number, and title <i>(example: BSTA 525 Intro to Biostatistics)</i>	Term, Year <i>(ex. Sp 22)</i>	OHSU CRN	Credits <i>(ex: 4)</i>	Apply to List degree requirement course fulfills, or specify "elective"

INSTRUCTIONS FOR STUDENT

1. Enter complete course information.
2. Submit form as an attachment to sphregistration@ohsu.edu. Use the subject line **"Dual Degree Registration Request: [Course Name], [Your Name]."**
3. You will receive confirmation that your request has been received.
4. Submitting a request does not guarantee enrollment. If your request is approved, you either will be sent instructions on how to complete registration yourself or be registered into the course by staff.

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