



**Inter American University of Puerto Rico
San Germán Campus**

Student Exchange Program

REGISTRATION REQUESTS

Student's Name	Social Security
Student's Signature	Date

**PLEASE LIST COURSES IN ORDER OF PREFERENCE
MAKE SURE YOU HAVE THE PRE-REQUISITES AND LABS ARE INCLUDED**

Control Num(CRN)	Subject	Course Code	Course Title	Credits	Days	Hours
Ex: 12345	MKTG	4243	Marketing Research	3	T/R	9:00/10:20

ALTERNATE COURSES

Control Num(CRN)	Subject	Course Code	Course Title	Credits	Days	Hours

TOTAL NUMBER OF CREDIT HOURS DESIRED: _____

(MAXIMUM CREDIT LOAD PERMITTED IS 15 CREDIT HOURS)