Special Course Registration Form
To be used to register for courses unavailable through on-line registration.
Submit to Registrar, LTSP, or fax to 215-248-7315.

TERM ____Fall  ____January  ____Spring  ____Summer  YEAR________

STUDENT NAME (print legibly) ____________________________________________

E-MAIL __________________________________ DEGREE OR OTHER PROGRAM: _______

__INDEPENDENT STUDY
Submit this form for purposes of meeting the registration deadline. You must additionally submit, no later than first day of semester or term, the separate Independent Study Request Form, along with your study proposal and bibliography. Registration here is provisional until proposal is received and approved by the Dean and/or Faculty.

Proposed Topic: ____________________________________________________________

Proposed Supervisor: ______________________________________________________

Check one:  ____ 1 unit ind study  ____ 1/2 unit ind study

__MAR THESIS 1  Thesis Supervisor: __________________________________________

[For Mar Thesis 2, Senior Project or Comprehensive, use specific forms available for those purposes.]

__CROSS REGISTRATION (Palmer, Reconstructionist Rabbinical cross-registration courses only; for Gettysburg and ELCA J-Term cross-registration, see the special forms for these purposes on the Forms and Resources web page). Check first with offering institution to make sure course is cross-registerable and open for additional registration.

Offering Institution: _______________________________________________________

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<th>COURSE NUMBER</th>
<th>ABBREVIATED COURSE TITLE</th>
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<th>UNITS</th>
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__PARTNER SCHOOL REGISTRATION (PhD, MAPL, Yale Exchange students, others upon approval):
Register first with offering institution; then notify LTSP Registrar to facilitate billing. MAPL students may instead transmit a copy of your Temple registration confirmation to registrar@ltsp.edu.

Offering Institution: _______________________________________________________

I am considered an  ____ in-state  ____ out-of-state  student at this partner school.

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Signature ____________________ Date Submitted ____________________