INSTRUCTIONAL TELEVISION NETWORK (ITN)
REGISTRATION FORM

<table>
<thead>
<tr>
<th>Fall 20______</th>
<th>Spring 20______</th>
<th>Summer 20______</th>
</tr>
</thead>
</table>

*Name: (Last) _____________________ (First) ___________________ *Student S.S.#_____________

Home

*Company Name: ______________________

*Address: __________________________

__________________________________

*City/State/Zip: ______________________

*Telephone: _________________________

*Fax: _______________________________

*Email: ______________________________

Company Proctor: ___________________ *Phone: ___________ *Fax: ___________

*Proctor e-mail _____________________

Company Contact: ___________________ Phone: ___________ Fax: ___________

Proctor e-mail _____________________

Have you been accepted into a graduate degree program at Case? (please circle one)  Yes  No

• If yes, Degree Program: _____________________ Department: _____________________ Advisor: _____________________

• If no, you must apply to register as a non-degree student.

• If you are registered as a non-degree student, how many credit hours of graduate course work have you completed to date at Case? ____________________________

Please list your course selection(s) BELOW.  (ITN Courses are subject to sufficient enrollment)

<table>
<thead>
<tr>
<th>ITN Course(s)</th>
<th>*CRN#</th>
<th>On-Campus Course(s)</th>
<th>*CRN#</th>
</tr>
</thead>
<tbody>
<tr>
<td>(e.g. EMAE 484)</td>
<td>(e.g. 37291)</td>
<td>(e.g. CHEM 499)</td>
<td>(e.g. 37793)</td>
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NOTE: You must identify an advisor and number of credit hours to register for Independent Study courses and thesis credit.