

# SCHOOL OF PUBLIC HEALTH CONTINUOUS ENROLLMENT REGISTRATION FORM

Semester	Year
<input type="radio"/> Fall <input type="radio"/> Spring <input type="radio"/> Summer	_____ _____ _____
INTERNATIONAL STUDENT?	
<input type="radio"/> YES <input type="radio"/> NO	

GWID	LAST NAME	FIRST NAME	EMAIL ADDRESS
RESIDENTIAL/ ONLINE	STUDENT LEVEL	STUDENT MAJOR/DEGREE	REGISTRATION STATUS
	<input type="radio"/> UNDERGRADUATE <input type="radio"/> GRADUATE		<input type="radio"/> I do not have any HOLDS preventing my registration.

**Continuous Enrollment (CE) Registration Requirements**

A student is considered to be continuously enrolled when registered for courses through GW or when registered for continuous enrollment and engaged in and appropriately registered for activities such as the following, with the prior approval of the program in which the student is enrolled: study away program; attendance at another institution with prior approval to have work transferred back to the GW program; completion of outstanding work in courses in which a grade of Incomplete (I) or In Progress (IPG) was received; or non-course instructional activities specific to the Program of Studies. This status is generally limited to one year.

**Continuous enrollment status is being requested for one of the following reasons (please indicate only one):**

- Internship
- Temporary enrollment at another institution
- Study Away
- Completion of prior Incomplete/ In Progress coursework
- Other: \_\_\_\_\_

*This form is intended for use by GWSPH undergraduate and graduate students and must be submitted with all required signatures to gwsphrecords@gwu.edu*

STUDENT
I verify that I have read the Continuous Enrollment Registration Requirements above. I am responsible for any previous accounts balance.
Signature: _____ Today's Date: _____

AUTHORIZED SCHOOL OFFICIAL
<input type="checkbox"/> Prior to start of the semester    OR    Effective Date: ____/____/____
Signature: _____ Today's Date: _____