

APPLICATION TO REGISTER FOR CDF PRACTICUM CLASS
(CDF 399, 443 or 450)

APPLICATION DUE DATES:
Spring Class –November 15
Summer or Fall Class – April 15

Name: _____ EKU ID Number: _____

EKU Email: _____ Phone Number: _____

Class Requested (*Circle One*): CDF 399 (3 Hr.) CDF 399 (6 Hr.) CDF 443 CDF 450

CRN #: _____ Semester: _____

Advisor Completes This Section			
Has Student Been Admitted to CDF Program?			CDF GPA
Total Credit Hrs. Completed			Overall GPA
Mid-Term Grades in CDF classes			
Approved Advisor Signature			

Submit completed form to Burrier 102.

FOR OFFICE USE ONLY	
Date Received	
Special Requirements Completed	
Attended Orientation	
Override Given	
Student Notified	
Student Registered	

APPROVED Course Instructor Signature	
------------------------------------------------	--