



Department Of Social Work

Course Approval Form

Semester: _____

This form must be completed and approved by the advisor prior to registration.

List the courses you plan to register for:

List prerequisites:

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |
| 6. _____ | _____ |
| 7. _____ | _____ |

All necessary prerequisite course work has been completed in order for me to enroll in these courses: (see MSW course descriptions in MSW Student Handbook***)

_____ **yes** _____ **no**

Print Name _____

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Please Return This Form to Rita Ohman, Student Support Assistant,
mailbox in 220 Bohannon Hall

***MSW Student Handbook also on Social Work web site at:

http://www.d.umn.edu/sw/MANUALS/documents/MSWStudentHandbook_013.pdf