

University of Pittsburgh at Johnstown Summer Visiting Student Enrollment Worksheet

STUDENT NAME (Last, First MI)	SS #	TERM	YEAR
	X X X - X X -	Summer	2024

	CRN	SUBJECT	CATALOG NBR	CR	DAYS	TIME	SESSION DATES
<input type="checkbox"/> ENROLL							
<input type="checkbox"/> ENROLL							
<input type="checkbox"/> ENROLL							
<input type="checkbox"/> ENROLL							

ALTERNATIVE COURSES:

<input type="checkbox"/> ENROLL							
<input type="checkbox"/> ENROLL							

Days, Times, and Locations are subject to change; please check your schedule online at <https://my.pitt.edu>

STUDENT SIGNATURE	DATE	TOTAL CREDIT HOURS

I, the student, by signing this form, agree and promise to pay the University all tuitions and fees resulting from this registration.