COLLEGE OF
Eastern Utah

# Student Schedule

| Social Security Number | | Student Name | | Semester and Year | |
|---|---|---|---|---|---|
| DEPT. | COURSE | SECTION | COURSE TITLE | CREDIT HRS | TIME |
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| ALTERNATE COURSES | | | | | |
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Student's Signature _____ Advisor's Signature _____

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_____
Last Name First Name and Initial Phone No.

_____
Local Address: Number and Street City State Zip Code

_____
Home Address: Number and Street City State Zip Code

Social Security Number _____ Birth Date _____

If you have attended CEU under any other name indicate here _____

Are you a veteran? Yes ☐ No ☐

Are you a Coop Program? Yes ☐ No ☐

Are you on any financial program or scholarship? Yes ☐ No ☐

If yes, which one? _____