



Extended Preceptor Enrollment Form

Name (please print): _____

Date: _____ Current Trimester: _____

Procedures for enrolling in elective courses:

1. Bring this completed, signed form to the Registrar's Office
2. Complete Term Registration for the upcoming trimester indicating you plan to continue coursework at CUKC
3. See Dr. Thomas for appropriate paperwork to set up your extended preceptorship
4. See the Financial Aid Office to set up your financial aid for the trimester

Please place a checkmark on the line below if you wish to enroll:

<u>Course Number/Name</u>	<u>Prerequisite/Co-requisite</u>	<u>Clock Hours/Week</u>
_____ CLI 807: Extended Preceptorship	Completion of all clinic requirements/None	28

*To drop or withdraw from an elective course, you must complete the appropriate paperwork in the Registrar's Office. **NON-ATTENDANCE OF CLASS DOES NOT CONSTITUTE AN OFFICIAL DROP OR WITHDRAWAL!!***

In signing this form, I state that I have read, understand, and agree to comply with University academic policies concerning electives, and that I take full responsibility for any consequences affecting my academic progression which may result from this action. I further understand that, if adding this (these) course(s) results in an increase of total hours for which I am registered, I am responsible for paying the balance of tuition due at the Business Office by the late payment deadline established, or I will be withdrawn from the added course(s).

I understand that electives follow the same refund schedule as regular courses, which means I will not receive a full refund for the course should I withdraw from the course after the add/withdraw dates posted in the University calendar. I understand that by adding this elective course, I am extending my studies in the Doctor of Chiropractic program and will graduate at the completion of the trimester.

Student Signature

Date