

New Student Registration Worksheet

Use this form to plan out your course selections then email your selections to registrar@simons-rock.edu. If you have questions, please contact us as listed below:

Registrar's Office • Bard College at Simon's Rock
84 Alford Road, Great Barrington, MA 01230
Phone: 413-528-7201, Fax: 413-528-7248

Name _____

Phone _____ Email _____

Math placement _____ Language placement _____

First-choice courses in order of priority (be sure to include all course information).

	Course Number	Course Title	Meeting Time	Credits
1 st				
2 nd				
3 rd				
4 th				
5 th				

RAPS: _____
(online, use the comments section for additional courses or RAPS if you run out of course entries)

General Alternates: (Courses you would want to take if any of your choices are not available)

	Course Number	Course Title	Meeting Time	Credits
1 st				
2 nd				
3 rd				

Specific Alternates: (Courses you would substitute only for a particular choice above)

	Course Number	Course Title	Meeting Time	Credits
1 st				
2 nd				
3 rd				