

## Distance Learning Registration Assistance

EFFECTIVE SEMESTER:  SPRING \_\_\_\_\_  SUMMER \_\_\_\_\_  FALL \_\_\_\_\_

MSU ID#: \_\_\_\_\_ NAME: \_\_\_\_\_  
Last First M.I.

Email Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

*I tried to register for the following courses and was unable to do so in Banner. Please assist.*

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Course Code (ex. EC 8103)	Title (ex. Economics for Managers)	Section (ex. 501)	Error Type (ex. test score)

\_\_\_\_\_  
Print Student's Name Student's Signature Date

\_\_\_\_\_  
Academic Department (if required) Name Academic Department Signature Date

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**FAX, EMAIL, OR MAIL THIS COMPLETED FORM TO:**  
**Distance Learning Office College of Business P.O. Box 5288 Mississippi State, MS 39762**  
**FAX: 662.325.8161 Phone: 662.325.8519 abaker@cobilan.msstate.edu**