



School of Engineering and Computer  
 Science Academic Advising Office  
 255 Engineering Center  
 115 Library Drive  
 Rochester, MI 48309-4479

Request to Enroll in Special Topics EGR 295/Lab Only

Phone: 248-370-2201 | Fax: 248-370-2084

www.oakland.edu/secs

**Instructions**

1. Complete all available fields below electronically (do not handwrite).
2. Print the form and sign it.
3. Obtain approval signature from professor of course.
4. Submit completed form to Academic Advising Office in 255 EC.

Student G#:

Current Semester:  Year:

Last Name:

First Name(s):

OU Email:

Daytime Phone:

Major: \_\_\_\_\_

Indicate the course associated with the lab:

Course	CRN	Course Title	Semester	Year

To be completed by supervising faculty. The student will attend the lab section that meets:

Lab Day	Lab Time	Print Professor Name	Professor Signature	Date
			X _____	

Student Signature:

Date:

THIS SECTION to be Completed by SECS Advising Office

Student notification date:

Academic Adviser Signature: \_\_\_\_\_

Date: \_\_\_\_\_