

PhD D-Clearance Registration Form

STUDENT NAME _____

USC ID# _____

SEMESTER FOR WHICH COURSES ARE REQUESTED _____

REQUESTED COMM COURSES

Course No. **COMM** _____ D-class No. _____ Unit(s) _____
(3 digit) (5 digit)

Course No. **COMM** _____ D-Class No. _____ Unit(s) _____

Course No. **COMM** _____ D-Class No. _____ Unit(s) _____

Course No. **COMM** _____ R-Class No. _____ Unit(s) _____

COGNATE COURSE(S)

Course No. _____ D-Class No. _____ Unit(s) _____
(Dept.) (3-digit) (5-digit)

Course No. _____ D-Class No. _____ Unit(s) _____

By signing, mentor/advisor indicates that all listed courses are approved to apply to student's program of study. Courses outside of COMM are approved to apply as cognate courses.

Signature _____ Date _____
Faculty Mentor/Advisor, School of Communication

Return completed form to Anne Marie Campian at campian@usc.edu or in ASC 307A to obtain d-clearance.