

**APEX/ADC Course Request Form**

**(Adult Accelerated Degree Completion)**

(This is your registration form)

Return this form to the APEX Office in CLC 514 after your advisor has signed or email it to kranerb@xavier.edu

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| **Student ID #:** | |
| **Name:** | |
| **Phone Number:** | |
| **Email:** | |
| **Semester:** | **Year:** |

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| --- | --- | --- |
| **CRN #** | **Course** | **Course Title** |
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| Comments : **note** any **courses you would like dropped if you get in this class**. Also, if you are **over the 18 credit hour limit** we will **not be able to register** you **without permission and signature from** your **college dean**. | |
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| Student Signature: | Date: |
|  | |
| **As student’s advisor, I fully explained the accelerated format of online classes to the student and the strict absentee policy. For online courses, have student view:** [**https://www.xavier.edu/online/Student-Orientation.cfm**](https://www.xavier.edu/online/Student-Orientation.cfm)**.** | |
| Advisor Signature: | Date: |
| Additional Notes: | |

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| For Office Use Only. | | |
| Approved By: | Processed By: | Date: |