UNIVERSITY OF CENTRAL FLORIDA

College of Engineering and Computer Science
Academic Affairs Office

Semester/Term: _____

REGISTRATION ADDENDUM FORM
An Addendum to Special Registration Access Form[1,2]

Student's Name: _____

Student's UCFID: _____

Instructor's Name: _____

Course: _____

List the learning outcomes for this course (required for independent study courses only):

1.
2.
3.
4.

List the assignments/activities in the course and the due date for each assignment/activity.

Assignment/Activity	**Due Date**

If this is an independent study taken for a grade (i.e., A, B, C,….), please attach the grading scheme for the course and what must be accomplished to earn specific possible grades.

_____ _____

Student's Signature Date Instructor's Signature Date

[1] This form must accompany a Special Registration Access Form.
[2] This form and the associated Special Registration Access Form must be archived by the department for 5 years.