

Master of Public Health Semester Registration and Override Request Form

PLEASE COMPLETE THE FOLLOWING INFORMATION – ALL INFORMATION IS REQUIRED			INSTRUCTIONS:	
Semester/Year: Name (Last, First, MI) Student ID # (NOT your SS#) Email (UNM or SALUD email required) Concentration:		 →Review and u Form which y →Determine wi the upcomini →Based on you your faculty a 	 →Arrange a meeting with your faculty advisor →Review and update your Faculty Advisement Form which your faculty advisor has →Determine which courses you will take for the upcoming semester →Based on your advisement meeting with your faculty advisor, please fill out this form →Submit to Danny, see note "How to Submit" 	
CRN (i.e.: 12345)	MPH Course Number (i.e.: PH 500)	MPH Course Name (i.e.: Intro to Registration and Overrides)		

Faculty Advisor Signature of Approval for Registration: _____

How to submit

→ ELECTRONIC COPY: Once all sections are completed, including faculty advisor signature, student can scan or take a picture and submit to Danny via email in PDF. Email to <u>dnoriegalucero@salud.unm.edu</u>. Alternatively, the faculty advisor can submit it to Danny via email, either with a signature or a note in the body of the email with approval.

Last updated: 08/06/2020 DRNL