

Dear new transfer or readmit student:

The Office of Academic Advising would like to welcome you to the College of Saint Benedict/Saint John's University (CSB/SJU)! You are most likely anxious to get started, so I am writing to inform you about registration procedures.

The registration process begins with the *Transfer/Readmit Student Course Request Form* ("CRF") below.

Whether you are enrolling at CSB/SJU for the first time or returning after some time away, it is critical that you complete and return the CRF promptly. If you have any questions while completing the form, you may contact our office by phone at 320-363-5687 (CSB students) or 320-363-2248 (SJU students).

The information you supply on the CRF allows us to conduct any necessary preliminary work before completing your registration. There are three options for finalizing your registration for the upcoming semester:

1. Meet with an Academic Advisor on campus, or
2. Arrange a telephone appointment with an Academic Advisor, or
3. Allow an advisor to finalize and send to you your course schedule via U.S. mail or e-mail.

If you select an in-person or telephone appointment with an Academic Advisor, *our office will contact you upon receipt of your CRF* to arrange a time for you to work directly with an advisor. The earliest date for such an appointment is May 1 for fall enrollees or December 1 for new spring enrollees.

In the Course History section of the CRF, you will note items related to math and global language skills. The math section allows us to determine whether you meet the math readiness requirement. We will also review your ACT/SAT math score to assist in the determination. If you have not satisfied this requirement, you will have the opportunity to take the *Qualitative Skills Inventory* (QSI) exam when you arrive on campus.

Global language proficiency is achieved upon successful completion of a college intermediate level language course. If you have not already met this requirement, please complete the appropriate on-line exam to determine language placement as soon as possible. Instructions for completing exams in French, German and Spanish are also found on the left hand side of the CSB/SJU Academic Advising home page at <http://www.csbsju.edu/Academic-Advising/Placement-Exams.htm>

In addition, if you are looking to take particular classes, you may follow this link ([https://ssb.csbsju.edu/proddad/bwckschd.p\\_disp\\_dyn\\_sched](https://ssb.csbsju.edu/proddad/bwckschd.p_disp_dyn_sched)) to access our online course schedule.

Feel free to contact the Office of Academic Advising if you have questions or concerns regarding registration, scheduling classes, transfer work, etc. The advising staff is looking forward to meeting and working with you!

Sincerely,

Jason Kelly  
Assistant Dean and Director of Academic Advising  
CSB/SJU Office of Academic Advising

**TRANSFER/READMIT STUDENT COURSE REQUEST FORM**

Name: \_\_\_\_\_ Home phone: \_\_\_\_\_  
 SSN: \_\_\_\_\_ Daytime/Cell phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

Because the following information will be used to create your class schedule, it is important that you be as thorough as possible. Your registration will be processed once you:

- ◆ Complete and return this Course Request Form to Academic Advising in the envelope provided.
- ◆ Request that an official transcript of any college coursework you may have completed be sent to the CSB/SJU Admission Office.

**ACADEMIC PLANS:**

I plan to enroll at CSB/SJU beginning (term/year): _____ I intend to graduate after _____ years at CSB/SJU.	Major: _____ Minor:* _____ Pre-Professional Program:* _____ *If Applicable
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**COURSE HISTORY:**

**MATH:**

List the highest level math course you have completed or are currently taking.

Course: _____	Final Grade: _____
High school or college: _____	Year/Term: _____

**GLOBAL LANGUAGE:**

List the highest level global language course you have completed or are currently taking.

Course: _____	Final Grade: _____
High school or college: _____	Year/Term: _____

**ADVANCED PLACEMENT/INTERNATIONAL BACCALAUREATE:**

List any AP or IB exams you have taken. Note that CSB/SJU must receive official test scores before AP/IB credit may be awarded.

Test: _____	Level: _____	Score: _____
Test: _____	Level: _____	Score: _____
Test: _____	Level: _____	Score: _____

**RETURN THIS FORM TO:**

Office of Academic Advising  
 College of St. Benedict  
 37 S. College Avenue  
 St. Joseph, MN 55374-2099  
 Fax: 320-363-5600  
 Helpline: 320-363-5687  
 E-mail: msauer@csbsju.edu

Office of Academic Advising  
 St. John's University  
 P.O. Box 2000  
 Collegeville, MN 56321-2000  
 Fax: 320-363-2714  
 Helpline: 320-363-2248  
 E-mail: mshimota@csbsju.edu

**TRANSFER WORK:**

Provide the following information for all courses completed or in progress through another college. Include PSEO and fulltime enrollment. Feel free to attach an additional page or copies of your *unofficial* transcript(s). If you have not already done so, **REQUEST THAT OFFICIAL TRANSCRIPTS OF COLLEGE COURSEWORK BE SENT TO THE CSB/SJU ADMISSION OFFICE AS SOON AS POSSIBLE** so that credits may be evaluated.

<u>College/University</u>	<u>Dept.</u>	<u>Course No.</u>	<u>Course Title</u>	<u># of Credits</u>	<u>Final Grade</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**COURSE SELECTION:**

List courses that interest you and may satisfy Common Curriculum requirements. You will be registered according to your intended major/minor/pre-professional program. Transfer work and availability of courses will be taken into consideration. Refer to [www.csbsju.edu/registrar](http://www.csbsju.edu/registrar) for the CSB/SJU Academic Catalog.

**Major/Minor/Pre-Professional Courses:**

**Common Curriculum Courses:**

<u>Dept.</u>	<u>Course No.</u>	<u>Title</u>	<u>Dept.</u>	<u>Course No.</u>	<u>Title</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**SCHEDULE CONSIDERATIONS:**

Indicate whether you intend to participate in any of the following. Be sure to include relevant details.

ROTC                                      No\_\_\_\_ Yes\_\_\_\_

Varsity sports                            No\_\_\_\_ Yes\_\_\_\_      Sport:\_\_\_\_\_

Music lessons/ensemble                No\_\_\_\_ Yes\_\_\_\_      Instrument/Ensemble\_\_\_\_\_ / \_\_\_\_\_

Other comments that may assist in your registration: \_\_\_\_\_  
\_\_\_\_\_

**OFFICE USE ONLY**

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

**FACULTY ADVISOR:** \_\_\_\_\_

**REG. DATE (PH/IP/MAIL):** \_\_\_\_\_

**REG. COMPLETE:** \_\_\_\_\_