MOOT COURT REGISTRATION FORM

Name: .................................................. CUNYfirst ID: ..............................

Student’s Signature: .............................. Date of Birth: (MM/DD)..............

Semester: ................................................ Date: ......................................

Instructor’s Name: ...........................................................

Instructor's Signature: .............................................. Date: ......................

Please indicate how many credits you earned in each of these non-classroom courses

___ Academic Legal Writing
___ Moot Court
___ Teaching Assistant
___ Independent Study
___ Public Interest/Public Service (counts as 1.5 cr.)
___ Total (note credit limits in Student Handbook)

Signature: .................................................. Date: ..............................

Sarah Valentine
Acting Associate Academic Dean

You must take this form to the Office of Registration (Room 4-109) to complete the registration for this course.