

**University of North Dakota Graduate School**  
 414 Twamley - P.O. Box 8178 - Grand Forks, ND 58202-8178  
 Phone (701) 777-2784; 1-800-CALL-UND (ext 2784); Fax (701) 777-3619

**JURIS DOCTOR / GRADUATE SCHOOL**  
**Combined Degree Program Semester Registration**

<input type="checkbox"/> <b>JD / MBA</b>	<input type="checkbox"/> <b>JD / MPA</b>	<input type="checkbox"/> <b>JD / PhD Criminal Justice</b>
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**SUBMIT THIS FORM TO THE GRADUATE SCHOOL WITH THE SIGNATURE OF THE GRADUATE DIRECTOR OF YOUR PROGRAM AND YOUR JD ADVISOR.**  
**PLEASE ALLOW 3-4 DAYS FOR YOUR REGISTRATION TO BE PROCESSED.**

Name _____	Date _____
Address _____	Student D _____
_____	Phone _____
_____	E-Mail _____

REGISTRATION FOR:  Fall 20\_\_\_\_(yr)       Spring 20\_\_\_\_(yr)       Summer 20\_\_\_\_(yr)

- Courses to be DOUBLE-COUNTED for your **Juris Doctor** and **Graduate** degree.  
 Law courses will be added to your Graduate transcript after the course is completed.  
 Graduate School courses will be added to your Law transcript after the course is completed.

Dept.	Class #	Catalog #	Credits	Course Title

- Registration for your **Juris Doctor** transcript. (Students can register on-line, please list below)

Dept.	Class #	Catalog #	Credits	Course Title

- Registration for your **Graduate** transcript. (Students can register on-line, please list below)

Dept.	Class #	Catalog #	Credits	Course Title

\*\*Please be aware that courses cannot be moved from Juris Doctorate to graduate or graduate to Juris Doctorate after this form has been submitted.

Graduate Director of graduate program _____	Date _____ Law School Advisor _____
Graduate School Dean _____	Date _____