



Stevens Institute of Technology
Castle Point on Hudson
Hoboken, NJ 07030
201.216.5210/5555
FAX 201.216.8030
Office of the Registrar
registrar@stevens.edu
http://www.stevens.edu/registrar

Request for Special Problems Course

Submission of this completed form constitutes an enrollment form for a Special Problems course.

Student Name: Student Identification No.:

Period Covered: Fall Winter Spring Spring II Summer I Summer II 20

Course Number (include subject prefix): Credits:

Title of Problem:

Name of Instructor:

Approval Signatures:

INSTRUCTOR DATE

DEPARTMENT DIRECTOR DATE

REGISTRAR DATE