

CS100 Registration Fall 1998

(This will be collected in lecture the first week of September.)

Name: (Last, first, Middle name or initial(s)) _____

Signature _____

Identify yourself in this way on every exam and program submitted for grading!!

Cornell Student ID Number: _____ Email Address _____

Grading option (Circle): A-F S/U Audit

Indicate below which lecture and which recitation section you plan to attend. If you wish to attend a lecture or section different from the one you are currently registered for, you **must** complete the appropriate **add/drop** procedures at your registrar's office.

	CS100A	CS100B
Lecture	-- 1. TR 09:05-09:55A Olin 155 -- 2. TR 11:15-12:05P Olin 155	-- 3. TR 09:05-09:55A Kimball B-11 -- 4. TR 11:15-12:05P Upson B-17
Section	-- 1. T 01:25-02:15P Upson 111 -- 2. T 01:25-02:15P Philips 219 -- 3. T 02:30-03:20P Philips 219 -- 4. T 03:35-04:25P Philips 219 -- 5. T 02:30-03:20P Upson 111 -- 6. W 01:25-02:15P Philips 203 -- 7. W 02:30-03:20P Philips 203 -- 8. W 03:35-04:25P Philips 203	-- 10. M 01:25-02:15P Upson 211 -- 11. M 02:30-03:20P Upson 211 -- 12. M 03:35-04:25P Upson 211 -- 13. T 10:10-11:00A Upson 211 -- 14. T 02:30-03:20P Upson B-17 -- 15. T 03:35-04:25P Kimball B-11

Local Address: _____

Telephone: _____

Home Address: _____

Telephone: _____

Your school: _____ Major (or intended major): _____ Expected Graduation Date: _____

Previous programming experience, if any. Please be specific, including both the programming languages studied and how much you studied them. If you have taken CS99, please indicate that.

I HAVE READ AND UNDERSTAND THE CODE OF ACADEMIC INTEGRITY AS IT APPLIES TO CS100.

Signed _____ Date _____

(continue on the back of the page)

(Please fill in both sections.)

I. ASSIGNMENT RETURN POLICY

If I don't pick up my graded programs in section, and I don't attach a yellow cover sheet to my program requesting that it be kept confidential, I understand that they may be made available for return on the tables in Carpenter.

Signature_____Date:_____

II. WAIVER UNDER FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT

Complete either the part above or the part below the dotted line.

I, , consent to the use of my Student ID number for the purpose of posting of grades for CS100 for the Fall 1998 semester, thereby waiving my rights in this regard under the Family Educational Rights and Privacy Act of 1974. I understand that such consent is not required by the University, and I affirm that it is in all respects freely and voluntarily given.

I understand that this waiver will be retained by the instructor in charge of the course for a period of one year following its expiration.

Signature_____Date:_____

=====

If you do not wish to sign the waiver, enter a **four-digit number** below, and make a note of it. This number will be used instead of your ID number to post your grades. If you prefer to enter the **four-digit number**, make sure you do not forget it!
