1DVKXD &RPPXQLW\ &ROOHJH

&RUSRUDWH DQG &RPPXQLW\ (GXFDWLRQ
$PKHUVW 6WUHHW
1DVKXD 1+
3KRQH)D[
ZZZ QDVKXDFF HGX HGXFRPPXQLW\

TERM: ____________________

$BBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBB

BBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBB

*

)RU FRPSOLDQFH SXUSRVHV HOLDSXULQ (Complete all items. Please print clearly and sign in ink at bottom.)

Federal Governmental Statistical Information (Optional):

Sex: US Citizen:

Ethnic Background:

Select one or more races:

CRN #	Course # and Section	Course / Workshop Title	Comments	Tuition

DQG DOO DGGLWLRQDO FRVWV

LQFOXGLQJ DQ\ SURWHVWHG FKHFN IHHV FRXUW HHV LI ZKLFK FRVWV DQG UHDVRQDEOH DWWRUQH\V IHHV

1R-&UHGLW &RXUVH 5HIXQG 3ROLF\ PXVW ZLWKGUDZ LQ ZULWLQJ DW OHDVW WKUHH GD\V SULRU WR WKH IHHV

5HJLVWUDWLRQ ZLOO EH SURFHVVHG LI \RX KDYH DQ RXWVWDQGLQJ REOLJDWLRQ WR 1&& 8SRQ FRPSOHWLRQ
PDLOHG &ODVVHV DUH VXEMHFW WR FKDQJH 6WXGHQWV QHHG WR FKHFN WKH 1&& ZHE VLWH
ORFDWLRQ V VFKHGXOH JUDGHV ILQDQFLDO DLG LQIRUPDWLRQ VWXGHQW HPDLO DFFRXQW HWF

Student Signature: ____ DATE: ______________

Department Chair Signature (For ESOL Students Only): ____ DATE: ______________

7KH &RPPXQLW\ &ROOHJH 6\VWHP RI 1HZ +DPSVKLUH &&61+ XVHV HOHFWURQLF PDLO WR FRQWDFW
QHVV WUDQVDFWLRQV ZLWK &&61+ XVLQJ D FRPSXWHU ZLWK D VXSSRUWHG RSHUDWLQJ V\VWHP DQG LQWHUQHW
&&61+ HPDLO DFFRXQW %\ ORJJLQJ LQWR &&61+ V\VWHPV LQFOXGLQJ EXW QRW OLPLWHG WR
&RPPXQLW\ &ROOHJH 6\VWHP DQG FRQVHQWLQJ WR UHFHLYH ZULWWHQ QRWLFHV HOHFWURQLFDOO\
FDQ XVH HOHFWURQLF PHFKDQLVPV DORQH WR FRQYH\ FULWLFDO LQIRUPDWLRQ
WLRQ DQG RWKHU DFWLYLWLHV DQG DFFRXQWV DUH FRPPXQLFDWHG E\ &&61+ <RX PD\ DOVR
ZLWKGUDZ \RXU FRQVHQW DW DQ\ WLPH E\ FRQWDFWLQJ 6WXGHQW 6HUYLFHV

FOR OFFICE USE ONLY:

5HYLVHG .0+