You are registering for:  □ Fall  □ Spring  □ Summer  Year__________

REGISTRANT INFORMATION
Last Name__________________________________ First Name ___________________________ Middle Name or Initial_______
Washington Univ. Student ID # ___________ OR Social Security # ___________ - ______ - _________
You must include Soc Sec # if registering for the first time
Email:________________________________________________________________________________________
Local Street Address____________________________________ City _____________________State_______ Zip_____________
(_______) ___ ___ ___ - ___ ___ ___ ___ (_______) ___ ___ ___ - ___ ___ ___ ___ (_______) ___ ___ ___ - ___ ___ ___ ___
Daytime Telephone number with A/C  Cell or Home Telephone number with A/C  Work Telephone number with A/C
Gender:  □ Male  □ Female (Check one)  Date of Birth: Month ___ ___ Day ___ ___ Year ___ ___ ___ ___
Place of Birth: City_________________________ State/Country: ___________________________
Employer’s Name: ___________________________________ Employer’s Address:________________________
Are you receiving tuition assistance from this employer?  □ Yes  □ No

DEMOGRAPHIC INFORMATION
Please indicate your race & ethnicity using the following categories. You may check one or more items as appropriate:

□ Hispanic or Latino  A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race
□ American Indian or Alaska Native  A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment
□ Asian  A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

□ Black or African American  A person having origins in any of the black racial groups of Africa
□ Native Hawaiian or Other Pacific Islander  A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
□ White  A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Please indicate your U.S. Citizenship or Immigration status (check one):

□ U.S. Citizen
□ Permanent Resident or Resident Alien (A person who is not a citizen or national of the United States but who has been admitted as a legal immigrant for the purpose of obtaining permanent resident alien status (and who holds either an alien registration card (Form I-551 or I-151), a Temporary Resident Card (Form I-688), or an Arrival-Departure Record (Form I-94) with a notation that conveys legal immigrant status such as Section 207 Refugee, Section 208 Asylee, Conditional Entrant Parolee or Cuban-Haitian).

□ Nonresident Alien (a person who is not a citizen or national of the United States and who is in this country on a visa or temporary basis and does not have the right to remain indefinitely). Visa type:__________________________________

I ACKNOWLEDGE THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.
Student Signature_________________________________________ Date________________________

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PREVIOUS EDUCATION

Have you previously attended Washington University? (check one)  □ Yes  □ No

If Yes, indicate university division: ___________________________  Semester and year last attended: ___________________________  YEAR

If No, have you applied for admission?  □ Yes  □ No  If Yes, which division? ___________________________

Have you ever been admitted to a University College degree or certificate program?  □ Yes  □ No

If Yes, check one:  □ Certificate  □ AA  □ BS  □ MLA  □ MA  □ MS  □ MHS

Area of concentration: _______________________________________________________________________________________

Last college or high school attended: ____________________________________________  Date____________________

COURSE INFORMATION

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<tr>
<th>Courses</th>
<th>Grade Option</th>
<th>Approvals</th>
<th>Tuition &amp; Fees</th>
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SUB TOTAL  $  

Dean/Advisor Approval  Date  Late Fee:  $  TOTAL AMOUNT DUE:  $  

METHOD OF PAYMENT

Select All That Apply:  Employer Assist $  Remission $  

Cash  $  Financial Aid $  WU Employee $  

Check  $  Scholarship $  Over 60 $  

Credit Card  $  Third Party Bill $  Spousal $  

FOR OFFICE USE ONLY

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For Credit Card Payments

If you want to use a Credit Card as part of your method of payment, a representative from University College/Summer School will contact you in the next 24-78 hours to obtain your credit card information. If you have any questions, please call our main office at 314 935-6700

Authorizing Signature  Date

Payment must accompany registration form.  Thank you.