

Non-degree Seeking / Part-time Registration Form

Name			Date	
Last	First	Initial		
Social Security # or SAU Student ID #		E-mail		
Is this your first course at Spring Arbor Uni	versity? YesNo_	Bir	th date	
Address	ressPhone (h		me)	
AddressNumber Street	Apt.		(Area) (Numbe	r)
			rk)	
City State	Zip Code	(Area) (Nu	mber)	
Country of Citizenship	Countr	y of Birth		
If not a U.S. citizen, are you a permanent re	sident? [] Yes [] No Gr	een Card #		
The federal government and accrediting age students. To help us comply, please respond which you identify yourself.	1			<u> </u>
*Do you consider yourself to be Hispanic or	Latino? [] Yes [] No			
*Please check one or more of the following: [] American Indian or Alaska Native [] Asian	: [] Black or African American [] White [] Native Hawaiian/Pacific Islander [] Multi-Racial			
Are you planning to earn a degree from Spri	ng Arbor University? Yes	s No		
Undergrad Grad				
Major or Program				
	COURSE INFOR	MATION		
Dept. Course # Section	Course Title			Credit hours
Main Campus Online	Off Campus Site	Site Location		
Start date of course:	Student signatu	re		