

Fax: (970)351-2519 Office: (970)351-2594 aimee.rogers@unco.edu

You are registering for UNC credit for the following course: Term: fall 2019

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Instructor | Title | Prefix/#/Section | CRN | Credits | Tuition |
| Tanni Anthony | Aim High: Elevating Our Early Intervention Practices | EDSE 513-609 |  | 1 | $65 |

**Important Dates:** Add Deadline\*: 9/20/2019 Drop Deadline: 9/27/19

**\*To be enrolled in the course, this form must be submitted before the Add Deadline to allow time for processing \***

Return form to: Tanni Anthony @ Anthony\_t@cde.state.co.us or the fax number above

**Social Security Number\*\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_ or UNC Bear Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_**

**\*Only provide if you do not have, or do not remember, your Bear ID**

**Have you earned a Bachelor’s degree**? yes no **Year received**\_\_\_\_\_\_\_\_ **Have you attended UNC before?** yes no

If yes, former or maiden name under which previously registered? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Full Legal Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First Middle Suffix (example Jr., Sr., III)

**Mailing Address**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**State**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Zip**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Gender:**  Male  Female **Marital Status:**  Married  Single Other

**Citizenship:** U.S. Non-U.S. If not a U.S. Citizen, Visa type?\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Visa #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Issue \_\_\_\_\_\_\_\_\_\_

**You MUST answer the following question or your application for registration will not be processed:** Have you ever been convicted of a crime, made a plea of guilty, accepted deferred judgement, been adjudicated, or been required to register as a sex offender? (Misdemeanor traffic violations are exempt.) Yes No If yes, email explanation to [aimee.rogers@unco.edu](mailto:aimee.rogers@unco.edu) – reference course in subject line

**The following information is required for University statistical records: (answer first question; check appropriate box(es)**

|  |  |  |
| --- | --- | --- |
| **YES** | **NO** | Hispanic or Latino Ethnicity (Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Culture |
|  | **1** | Black or African American |
|  | **2** | American Indian or Alaska Native |

|  |  |  |
| --- | --- | --- |
|  | **3** | Asian |
|  | **4** | Native Hawaiian |
|  | **5** | White |
|  | **6** | DO NOT WISH TO PROVIDE |

|  |
| --- |
| ***PLEASE READ AND SIGN***  ***Important Course drop/withdrawal information link:*** [*http://www.unco.edu/regrec/Current%20Students/ShortCourse.html*](http://www.unco.edu/regrec/Current%20Students/ShortCourse.html)   * *If you have more than one course on your schedule for the semester, you may withdraw through URSA from an individual course through the Individual Course Withdrawal date. There is no adjustment to tuition.* * *If this is your only course for the semester, you may withdraw through the Complete Schedule Withdrawal date by contacting the Office of the Registrar at 970-351-2231. Tuition may be adjusted depending on the date of complete withdrawal.* * *If you stop attending the course but fail to officially withdraw from the course(s), you will be responsible for full tuition/fees and will be assigned the grade earned.*   *I understand that if my account becomes delinquent, I will be responsible to pay the University past due/service charges as a result of such delinquent account. I acknowledge that I am responsible for the charges and I have read and understand this.*  ***Signature Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Note: Registration form must be filled out completely or your registration will NOT be processed.*** |
| **Office use only:** On Banner\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Confirmation Sent by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |