

# UNDERGRADUATE/GRADUATE REGISTRATION FORM

# FALL SESSION 2017

Include payment of \$125 (check made out to Worcester State University or enter your credit card information below) and mail to: Erin Earnst, EDC, 43 Foundry Ave., Waltham, MA 02453-8313. REGISTRATION for Fall Session must be postmarked by October 2, 2017. Contact Erin Earnst at [earnst@edc.org](mailto:earnst@edc.org) with any questions.

## Student Information

Please Print Clearly



**WORCESTER STATE UNIVERSITY**

**OR**   
WSU Student ID Number Social Security Number (optional)  
 Last Name  
 First Name  Middle Initial  
 Other Last Name under which records may appear  
 Mailing Address - Number and Street

## How did you first hear about the courses offered?

- Web
- Brochure
- Newspaper
- Radio
- Friend
- Other

City  State  Zip Code  
 Best Telephone Number  Cell  Home  Work  
 Birthdate in numbers - month/day/year  MALE  FEMALE **Email address:**

**Demographics** (for reporting purposes only — check all that apply):

**Ethnic Background:**  Non-Hispanic (NHS)  Hispanic (HIS)

**Race** (choose as many as apply):

- American/Alaska Native (AN)
- Hawaiian/Pacific Islander (HP)
- Asian (AS)
- Black or African American (BL)
- Cape Verdean (CV)
- White (WH)

**Citizenship:**  U.S.  (PR) Foreign, but Permanent Resident  (F) Student Visa  Other

## Course Selection

If you are registering for 200-level courses you must have a Bachelor's Degree. Your initials in this section will attest to verification of your degree.

Course	Section	Description	Credits	Meeting	Time	Fee
EN 101	E1	English Composition	3	M	6:00 pm	\$
<b>CI 971</b>	<b>CTP</b>	<b>Online/Blended Instructional Strategies for Teaching Art</b>	<b>1</b>			<b>\$125</b>

I certify that I have completed all prerequisites for the above listed courses at: \_\_\_\_\_ college/university  
 Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Method of Payment

Please attach check or complete this section for payment authorization.

Student's Name \_\_\_\_\_  
 Enclosed is a check for tuition & fees, payable to **Worcester State University**  MasterCard  Visa  Discover  American Express

Cardholder's Name \_\_\_\_\_ Cardholder's Signature \_\_\_\_\_

Account Number  Expiration Date  3 or 4 digit security code