INCOMPLETE FORMS WILL BE RETURNED

ALASKA PACIFIC UNIVERSITY PLEASE PRINT CLEARLY

REGISTRAR'S OFFICE 4101 UNIVERSITY DRIVE 907-564-8210 / 907-563-9640 fax ANCHORAGE, AK 99508-4672

OFF-CAMPUS APPLICATION FOR ADMISSION AND REGISTRATION FORM

| (FULL LEGAL) NAME * | LAST | FIRST | FIRST MIDDLE | | | DEN/PREVI | OUS NAME(S) | APU ID # | | |
|--|--|--|--|------------|---------------------------------|--|--|--|------------|----------|
| STREET / BOX CITY MAILING ADDRESS ** | | | | | | STATE | ZIP | SS#* | | |
| EMAIL ADDRESS | * | | | WORK PHONE | | | HOME PHONE | | | |
| | | | | | | | | | | |
| Application for Admission: Enrollment Period: □Fall □Spring ☑Summer Credit level: ☑Undergraduate (100-400) □Professional Development (500) □Graduate (600) Honor Statement: I certify that the information in this application is accurate and complete. I understand that falsifying any part of this application may result in cancellation of admission or dismissal from the University. Signature | | | | | | | | | | |
| Registration Form: *IF student is under 18 parent must sign | | | | | | | | | | |
| DEPT & COURSE | SECTION NUMBER | COURSE TITLE | | | BEG DATE | END DATI | | | INSTRUCTOR | LOCATION |
| EDUC 19200 | 001 | Alaska Business Week | | | 7/17/16 | 7/22/ | | | Schuh | |
| *All off-campus courses are nonrefundable * >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>> | | | | | | | | | | |
| ALL INFORMATION IS REQUIRED FOR RECORD KEEPING PURPOSES! Information is required for federal and state reporting purposes and must be provided EACH time that you register. (Information is reported in statistical form only.) Incomplete forms will be returned and credit will not be granted. If your name has changed from that on your previous APU/AMU records, we will need legal documentation of that change before your official records can be changed. This may be a copy of your marriage certificate, divorce decree, court orders, etc. PREVIOUS EDUCATION (Check >>>>> THIS INFO REQUIRED TO (See No Provided EACH time that you register.) B A / BS, have taken of Attended a 4-year color other than APU(AMU) | | | | | courses luate courses niversity | Do yo Mexica culture In addit | ETHNIC BACKGROUND: Do you consider yourself to be Hispanic or Latino? A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race Yes \(\Boxed{\text{No}} \) No \(\Boxed{\text{I}} \) In addition, you may select one or more of the following to describe yourself: Having origins in original peoples of: \[\Boxed{\text{Amer Ind/AK Native}} \] North, South & Central America w/tribal | | | |
| YES NO Have y taken a | 5 Associate Degree of 4 Attended a 2-year of 3 GED High School I | sociate Degree or RN Diploma tended a 2-year college ED High School Diploma, have never attended | | | ☐ Asian ☐ Black/African-Amer | | affiliation or community attachment Far East, SE Asia or Indian Subcontinent Black racial groups of Africa | | | |
| SEX: M F BIRTH DA | TE: | month/day/year | a college or university 2 High School Diploma, have never attended a college or university 1 Do NOT have a High School Diploma | | | | tive HI/Pac Island | r Hawaii, Guam, Samoa, & other Pac Islander Europe, the Middle East, or North Africa | | |