



PO Box 756500
 Fairbanks, AK 99775-6500
 1-866-478-2721 - phone
 907-474-6280 - fax

College of Rural and Community Development REGISTRATION FORM

FALL _____ SPRING _____ SUMMER _____ YEAR: _____

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

DATE OF BIRTH (MM/DD/YY) _____ UAID NUMBER _____ or _____ SSN - if 1st time registering _____

ADDRESS _____ *CHECK HERE IF THIS IS A CHANGE OF ADDRESS*

CITY _____ STATE _____ ZIP CODE _____ E-MAIL ADDRESS _____

EVENING PHONE _____ DAY PHONE _____ PERMANENT PHONE _____ FAX NUMBER _____

DEMOGRAPHICS - for statistical and record-keeping purposes only:

Gender: Male _____ Female _____

Did you graduate from high school? *Yes _____ **No _____

*If Yes: Name of High School _____ State _____

Graduation Mo/Yr _____/_____/_____

If No Did you complete the GED: *Yes _____ No _____

***If Yes: Mo/Year/State: _____/_____/_____

If you have attended UAF under a different name, please list name used: _____

US Citizen: Yes _____ No _____

If No: Nation of Birth: _____

Nation of Citizenship: _____

Nationality: _____

VISA Type: _____

Residency (Physically in Alaska 2 years prior to enrollment and intent to stay in Alaska):

Alaska Resident _____ Non-Resident _____ or

Military/National Guard _____

Date residency began: ____/____/_____

COURSE INFORMATION check "audit" if you are auditing a class Are you in a degree program? ____ Yes ____ No

CRN	DEPT	NUMBER	SECTION	COURSE TITLE	INSTRUCTOR	CREDITS
						audit? <input type="checkbox"/>
						audit? <input type="checkbox"/>
						audit? <input type="checkbox"/>
						audit? <input type="checkbox"/>
TOTAL CREDITS						

I understand that I am responsible for all applicable UAF academic regulations, tuition and fees, whether or not I successfully complete the course or courses in which I am enrolling.

SIGNATURE _____

DATE _____

ADVISOR'S SIGNATURE (if in a degree program) _____

If you anticipate needing an accommodation for any of your classes, please contact the UAF Office of Disability Services at: (907)474-5655 (P), (907)474-5688 (Fax), or e-mail uaf-disabilityservices@alaska.edu.

- PLEASE CHECK YOUR REGIONAL CAMPUS**
- Bristol Bay Campus (800)478-5109 (phone) (907)842-5692 (fax)
 - Chukchi Campus (800)478-3402 (phone) (907)442-3204 (fax)
 - Interior-Aleutians Campus (888)474-5207 (phone) (907)474-5208 (fax)
 - Other _____
 - Kuskokwim Campus (800)478-5822 (phone) (907)543-4527 (fax)
 - Northwest Campus (800)478-2202 (phone) (907)443-5602 (fax)
 - CRCD-Fairbanks (907)474-1916 (phone) (907)474-6280 (fax)

Ethnicity:

- AK Aleut
- AK Eskimo-Other/Unspec
- AK Indian - Haida
- AK Indian - Other/Unspec
- AK Indian - Tlingit
- AK Indian - Tsimpshian
- AK Native - Other/Unspec
- AK Eskimo - Inupiaq
- AK Native - Southeast
- AK Indian - Athabascan
- AK Eskimo - Yupik
- Asian and White
- Black and White
- Hispanic or Latino
- American Indian and Black
- Amer Indian-Not AK Native
- American Indian and White
- Native Hawaiian/Oth Pac Is
- Asian/Pacific Islander
- Asian
- Student Refused
- Unknown/Not Specified
- White - Non Hispanic
- Other

COURSE COSTS

OFFICE USE ONLY

Tuition	\$ _____
Sponsored Course Fee	\$ _____
Lab Fees	\$ _____
Service Fees	\$ _____
UA Tech Fee	\$ _____
Other (describe)	\$ _____
SUBTOTAL TUITION/FEES	\$ _____
Credits to Balance Due:	
TMS	\$ _____
*Credit Card	\$ _____
Financial Aid	\$ _____
On Account	\$ _____
Check/MO (Money Order)	\$ _____
PAF (Payment Authorization Form)	\$ _____
Cash (in person only)	\$ _____
Total Due after Credits Applied	\$ _____

*If you wish to pay by credit card, you may do so in person, on uonline, or call your local campus with your credit card information.

An affirmative action/equal opportunity employer and educational institute.

