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IN-PERSON REGISTRATION FORM



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Semester _____

P _____

NAME: _____ **UA ID (or SSN):** _____
Please print (Last) (First) (M I)

SEMESTER OF ENROLLMENT: Year 20____ Fall Spring Summer **Date of Birth (MM/DD/YYYY):** _____

CURRENT MAILING ADDRESS: _____ Day Phone: _____
_____ Evening Phone: _____
_____ Email Address: _____
(City) (State) (Zip)

Residency¹: Students seeking Alaskan residency or a waiver of non-resident surcharge must complete an "Application for Resident Tuition" or "Waiver of Non-Resident Surcharge" and provide required documentation to the Office of Admissions before the published first day of instruction (UA Board of Regents Regulation R05.10.05). See reverse side for information.

DEMOGRAPHIC INFORMATION: See reverse side for information and codes.

Male Female Ethnicity²: _____ Vet/Military Status³: _____

For instructions on withholding directory information, please see FERPA on reverse side⁴.

US Citizen? Yes No If no, Nation of birth: _____ Nation of citizenship: _____
Visa Type: _____ Permanent Resident? Yes No

PRIOR EDUCATION INFORMATION

Did you graduate from high school?

Yes Graduation date? (MM/DD/Year) _____ Name of high school: _____
High School location: (city/state) _____

No If NO, did you complete the GED? Yes No

Date GED completed? (MM/DD/Year) _____ Location of GED (state) _____

If you attended UAF before 1983, state where and dates of attendance: _____

If you ever attended any UA branch under another name, state name used: _____

COURSE INFORMATION (Complete all information requested below. Refer to the class schedule **online** for course information)

CRN	Dept.	Course Number	Section	Course Title	# of Credits	"Yes" if Audit	Instructor Signature (required after last day of late registration)

I understand 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. The university may drop me for nonpayment.⁵

I promise to pay attorney's fees and other reasonable collection costs necessary for the collection of any amounts owed UA. If I do not pay, the university may take my Permanent Fund Dividend under Alaska Statutes 14.40.251 and 43.23.073.

Student's Signature _____ **Date:** _____

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Processed By: _____ Date: _____

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1 RESIDENT AND NON-RESIDENT TUITION

First-time non-degree students or students returning to enrollment after more than a two-year absence are considered non-residents until they submit an "Application for Resident Tuition" with this registration form before the first published day of instruction and are approved (for the purposes of residency pursuant to UA Board of Regents Regulation R05.10.05) as a resident of Alaska.

For more specific criteria, please refer to the "UA Application for Resident Tuition Assessment" at www.uaf.edu/admissions/pdf/res_tuition_app.pdf.

2 ETHNICITY*

Code	Description
AA	Alaska Aleut
AE	Alaska Eskimo, other
AH	Alaska Indian, Haida
AI	Alaska Indian, Other
AK	Alaska Indian, Tlingit
AM	Alaska Indian, Tsimpshian
AN	Alaska Native, Other
AQ	Alaska Eskimo, Inupiaq
AS	Alaska Native, Southeast
AT	Alaska Indian, Athabaskan
AY	Alaska Eskimo, Yup'ik
BL	Black, Non-Hispanic
HI	Hispanic
IN	American Indian (Not Alaska Native)
OT	Other
PI	Asian, Pacific Islander
WH	White
XX	American Indian or Alaska Native

* Requested for compliance with Title IV of the Civil Rights Act of 1964

3 VETERAN/MILITARY STATUS

Code	Description
Blank	Non-veteran
AA	Active Duty – Army
AC	Active Duty – Coast Guard
AF	Active Duty – Air Force
AN	Active Duty – Navy/Marines
AO	Active Duty – Other
DC	Dependent Child
DS	Dependent Spouse
VR	Veteran – Discharged/Retired (Eligible)
WW	Widow/Widower

4 INFORMATION RELEASE/FERPA

The Office of Admissions and the Registrar is responsible for keeping student education records. The full copy of the university's policies regarding access to student records under the Family Educational Rights and Privacy Act of 1974 (FERPA) are available at www.uaf.edu/reg/ferpa.

Directory Information

The university may release certain directory information to the public on a routine basis unless a student requests, in writing, that the university not release it. Forms to request that directory information not be released are available in the Office of Admissions and the Registrar.

No directory information will be released until the last day of late registration. Any request to withhold directory information will continue until a student provides permission, in writing, for the university to release such. After that, information will be released when appropriate. The names of students who have requested their directory information be withheld will not appear in the published university chancellor's and dean's lists.

The following is considered directory information:

1. Name
2. E-mail address
3. Home city and state
4. Weight and height of students on athletic teams
5. Dates of attendance at UAF
6. Program/major field(s) of study
7. Degrees and certificates received, including dates
8. Participation in officially recognized university activities
9. Academic and co-curricular honors, awards and scholarships received, including dates

5 LATE PAYMENT/REINSTATEMENT FEES

Cost: \$100; \$35 per month for late payment plan payments.

Who pays: All students who have missed the fee payment deadline and have a balance of \$100 or more. An additional \$100 fee will be added to accounts which are not paid by the withdrawal deadline. **The university may drop you for non-payment.**

What's covered: Processing of late payments

for more information about fees, contact the Business Office (474-7384).



Office of Admissions and the Registrar,
102 Signers' Hall • PO Box 757480, Fairbanks, Alaska 99775
800-478-1823 • 907-474-7500 • 907-474-7097 (fax)
admissions@uaf.edu • registrar@uaf.edu