



Student Services
 PO Box 2889, Palmer AK 99645
 Phone 907-745-9746, Fax 907-745-9747

Received

Office use only

REGISTRATION FORM

PERSONAL:

Full Legal Name _____
(Last name) (first) (middle)

Social Security number (required for new students) or UA ID # _____ Date of Birth _____
(Month) (Day) (Year)

Previous Names _____ Gender: Male Female

Phone Number _____ Preferred e-mail address: _____

Mailing Address _____
(Street) (City) (State) (ZIP)

Ethnic category What is your ethnicity? Please check One. Not Hispanic or Latino Hispanic or Latino

Ethnic Origin: Please indicate which, if any of the following races you consider yourself to be. You may mark more than one. The University is collecting this information as required by federal regulation in reporting races and ethnicity for employment and educational statistics.

- Alaska Native - Aleut
- Alaska Native - Athabascan
- Alaska Native - Haida
- Alaska Native - Inupiaq
- Alaska Native - Other/Unspecified
- Alaska Native - Southeast
- Alaska Native - Tlingit
- Alaska Native - Tsimshian
- Alaska Native - Yupik
- American Indian - Not Alaska Native
- American Indian or AK Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Not Specified

CITIZENSHIP STATUS Are you a U.S. citizen? Yes No

If you are not a U.S. Citizen, what is your current immigration status? _____
You must submit documentation of your immigration status to Student Services.

RESIDENCY: Are you qualified to receive an Alaska Permanent Fund Dividend? Yes No

*Eligibility for an AK Permanent Fund Dividend is used to determine residency.
 I understand I may be requested to provide documentation to verify eligibility.
 For more information on residency: <http://www.alaska.edu/student-services/student/>*

Please choose one semester: Fall 20 _____ Spring 20 _____ Summer 20 _____

| CRN | Subject | Course # | Section | Course Title | Credit/Audit | Instructor's Signature | Date |
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I understand that by signing I am responsible for tuition and fees associated with any course(s) for which I have registered. I am responsible for dropping courses by published deadlines to ensure charges are not incurred. I understand that if I default on this student account, I am responsible for the collection, attorney and legal fees. The University may garnish my Alaska Permanent Fund Dividend under Alaska Statutes 14.40.251 and 43.23.073. I also understand that the past due debt may be reported to credit bureaus.

Student's Signature: _____ Date: _____

OFFICE USE Date entered: _____ Initials: _____ PMCS/Middle College ADV initials _____ SGAADV R