Plymouth State University College of Graduate Studies

2009-2010 NELMS Registration Form

TODAY'S DATE _____

(1) COMPLETE ALL ITEMS. (2) FILL IN AND TOTAL ALL CHARGES DUE. (3) SIGN THIS FORM AT THE BOTTOM.

LAST NAME _____ FIRST NAME _____ MI ____

STUDENT ID NUMBER **(CURRENT STUDENT)** _____ OR SOCIAL SECURITY NUMBER **(FIRST TIME STUDENT)** _____ OTHER NAMES USED IN UNIVERSITY SYSTEM _____

BIRTH DATE (MMDDYYYY) _____ HAVE YOU BEEN ADMITTED TO THE COLLEGE OF GRADUATE STUDIES? ☐ NO ☐ YES IF YES, MAJOR? _____

MAILING ADDRESS _____ CITY/TOWN _____ STATE _____ ZIP _____

HOME PHONE WITH AREA CODE _____ WORK PHONE WITH AREA CODE _____ EXT. _____ CELL PHONE WITH AREA CODE _____

PERSONAL E-MAIL _____ BUSINESS E-MAIL _____

ARE YOU A U.S. CITIZEN? ☐ YES ☐ NO IF NO, PLEASE SELECT ONE: ☐ RESIDENT ALIEN ☐ NON-RESIDENT ALIEN

COUNTRY OF ORIGIN _____ VISA TYPE _____

ARE YOU A NEW HAMPSHIRE RESIDENT? ☐ YES ☐ NO HAVE YOU EVER PAID OUT-OF-STATE TUITION AT PSU? ☐ YES ☐ NO

PLEASE COMPLETE ALL THAT APPLY. I HAVE A :

☐ BACHELOR'S DEGREE FROM _____ ☐ MASTER'S DEGREE FROM _____

☐ CERTIFICATE OF ADVANCED GRADUATE STUDIES FROM _____ ☐ DOCTORATE FROM _____

☐ CHECK HERE IF YOU HAVE A DISABILITY THAT MAY REQUIRE SPECIAL SERVICES. ☐ CHECK HERE IF YOU RECEIVE VA BENEFITS.

FOR STATISTICAL USE ONLY: ☐ F ☐ M ETHNICITY AND RACE: ARE YOU HISPANIC/LATINO? ☐ YES ☐ NO

SELECT ONE OR MORE TO INDICATE YOUR RACE:

☐ AMER. INDIAN/ALASKAN NATIVE ☐ BLACK/AFRICAN AMERICAN ☐ ASIAN ☐ WHITE ☐ NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER

COURSE DEPT	COURSE NUMBER	COURSE TITLE	CRN	LOCATION	CR	INSTRUCTOR	COURSE CHARGE
ED	5500	Formative Assessment	529	Off Campus	2	R.Spear	290.00

ADMIN FEE*	$25
OTHER FEES	
TOTAL	315.00

2009-2010 TUITION PER CREDIT
$145/CREDIT**
TUITION RATE VALID THOUGH 6/30/2010

*PLEASE NOTE: THERE IS A $25 ADMINISTRATIVE FEE FOR ALL GRADUATE REGISTRATION FORMS. PAYMENT AND ANY SUPPORTING DOCUMENTS MUST ACCOMPANY REGISTRATION IN ORDER TO PROCESS ENROLLMENT. **TUITION RATES ARE SUBJECT TO CHANGE AND TO USNH APPROVAL. *** RETURNED CHECKS WILL BE ASSESSED A FEE.

STUDENT SIGNATURE _____ ENCLOSED IS MY CHECK FOR$ _____ (PAYABLE TO PSU) ***

APPROVED FINANCIAL AID ☐ PURCHASE ORDER ☐ USNH TUITION WAIVER ☐ ASSISTANTSHIP/FELLOWSHIP WAIVER ☐ OTHER SPECIFY _____

NAME AS IT APPEARS ON CARD _____ (PLEASE PRINT) CHARGE $ _____ TO MY CREDIT CARD

CARD HOLDER SIGNATURE _____

ACCOUNT NUMBER _____ EXPIRATION DATE (MMYY) _____ ☐ VISA ☐ MASTERCARD ☐ AMEX ☐ DISCOVER

MAIL TO: PLYMOUTH STATE UNIVERSITY COLLEGE OF GRADUATE STUDIES, MSC 11, 17 HIGH STREET, PLYMOUTH NH 03264-1595 OR FAX TO: (603) 535-2572