

High 5/Project Adventure Graduate Credit Registration Form

| ast Name | | First Name | First Name | | Middle | | |
|--|---|---|---|----------------------------------|------------|----------|--|
| Other Name(s) Used | in University System | ? | | | | | |
| Have you been admitted to a program? | | | yes, program? | Is this your first class at PSU? | Yes | No | |
| Mailing Address | | City_ | | State | _ Zip | | |
| Cell Phone | | Alternate Phone_ | | | M | F | |
| mail Address | | | Student ID# (Cu | rrent Student) | | | |
| ast Four SSN Digits | s (First Time Student) | XXX-XX | Birth Month and Day | (MM/DD) | / | _xxxx | |
| Are you a U.S. Cit | tizen Yes No |) | Ethnicity/Race: | | | | |
| If not, Visa Stat | us: Resident Alien | Non-Resident Alien | American Indian/A | /Alaska Native Asian | | | |
| Nation of Citizens | hip: | | Black/African Am | merican White | | hite | |
| Have you ever pai | NH resident for at least dout of state tuition a | at PSU? Y N | Native Hawaiian/P | | | | |
| Do you receive V | A educational benefits | s? Y N | Are you Hispanic/ | Latino? Yes | No | | |
| | None dicate the term (Fall, Earl duate credit within 30 days | ly Spring, Spring, or Summer) and | y calling (603) 535-3300 p. d the year for the course or cou | | | | |
| Term & Year | Course Number | Course Titl | e CR | N Credits | Worksh | op Dates | |
| (Example) Summer 2018 | EE-5255 | Adventure with Youth | a at Risk | 2 | May 21- | 23 2018 | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Il payment is due at the fees are subject to cha | time of registration. Failure to p | ay will put you in jeopardy of | being dropped from | m your cou | rrse(s). | |
| ayment options and bi urchase order, USNH | lling information are list tuition waiver, Assistants | ed on the Student Account Servic ship waiver, veteran's benefits, etc to your account can be applied. | | | | | |
| | _ | https://campus.plymouth.edu/fina | | | | | |
| Student Signature | I certify that the inj | formation supplied on this form is tr | ше. | Date | | | |
| | | | | | | | |
| Processed by: | | Date | | | | 7/2018 | |

Phone: (603) 535-2345, Fax (603) 535-2724