

SIGNATURE

## Office of the Registrar

181 White Street, Old Main 102 Danbury, CT 06810

Phone: (203) 837-9200 Fax: (203) 837-9049

☐ Winter Intersession

DATE

## Non-Matriculated Undergraduate Student Registration Form

Semester: ☐ Spring ☐ Spring Break ☐ Summer ☐ Fall

Enrollment Status (please check one): ☐ Previously registered	□ New student	
PERSONAL INFORMATION		
WCSU Banner ID No Social Security No Social Security number is not required; optional only for tax purposes.		
Gender: □ Male □ Female Race: □ American Indian	☐ Asian ☐ Black (Not of Hispanic Ori	igin) $\square$ Hispanic $\square$ White $\square$ Other
$Prefix: \; \square \; Mr.  \square \; Mrs.  \square \; Miss  \square \; Ms.  \square \; Dr.$		
Name: LAST	FIRST	MI
Address:		
NUMBER & STREET		APT OR UNIT
CITY/TOWN Phone:	STATE	ZIP
HOME	MOBILE	
Email Address:		
Emergency Contact:		
NAME/RELATIONSHIP		PHONE
Date of Birth: Veteran Status: ☐ Y	'es □ No ontact with the Office of Veterans Affairs? □ Yes □ I	No
Are you a Connecticut resident? ☐ Yes ☐ No Are you a c	citizen of the United States? $\square$ Yes $\square$ No	
Educational level to date:   High school diploma or equivalent	nt □ A.S. degree □ Bachelors degre	ee □ Master's degree □ Doctoral degree
COURSE INFORMATION		
I would like to register for the following courses (proof of prere	equisites required with proper documental	tion (i.e. SAT/ACT scores, unofficial transcript, etc.):
5-DIGIT COURSE CODE DEPARTMENT	COURSE NO.	SECTION
PAYMENT INFORMATION		
All payments are due at the time of registration. WCSU acce		· · · · · · · · · · · · · · · · · · ·
<ul> <li>All debit/credit card transactions must be made online at w</li> <li>Non-attendance of classes does not entitle students to a ref are determined based on the date of withdrawal. For more in the date of withdrawal.</li> </ul>	und on their tuition and fee bill, formal withd	rawal is required. WCSU refund rules apply and rates
<ul><li>www.wcsu.edu/registrar.</li><li>I understand that when I register for any class at Western Co</li></ul>	onnecticut State University or receive any ser	rvice from Western Connecticut State University
accept full responsibility to pay all tuition, fees, and other as assessed as a result of my course/housing registration and/c Collection Agency Fees: I understand and accept that if I fail by the scheduled due date, and fail to make acceptable payr my delinquent account to a collection agency and the univer collection agency fee which may be based on a percentage a expenses, including reasonable attorney's fees, necessary for reported to one or more of the national credit bureaus.	ssociated costs, which may include, but is not or receipt of services. I to pay my student account bill or any monies ment arrangements to bring my account curristy may no longer accept direct payments. I at a maximum of fifteen percent (15%) of my or the content of the content of the content (15%) of my or the content (15%) or	limited to, housing, meals, fines, or incidental charges sidule and owing Western Connecticut State University rent, Western Connecticut State University may refer further understand that I am responsible for paying the delinquent account balance, together with all costs and
☐ I realize that by registering for these classes I will be held responsible for full payment of the above-listed courses in accordance with the terms outlined above. Please refer to the Cashier's office for payment schedule.		