

EMPLOYEE REGISTRATION FOR COURSES

Student ID _____

Fall/Spring 20 _____

Mr./Mrs./Miss _____ (Last) (First) (Middle) **Circle One:** New Enrollment Re-Enrollment Graduate Assistant

Degree Name _____ What year was degree started? _____ Year you started on Staff/Faculty? _____

COURSE(S) TAKING:

Anticipated Graduation _____

Course Number	Course Title	Credit Hours	Class Time	Class Time*

Circle One in Each Box					
Credit	Audit	On-line	On-Campus	Undergrad	Grad
Credit	Audit	On-line	On-Campus	Undergrad	Grad
Credit	Audit	On-line	On-Campus	Undergrad	Grad

*Will this course(s) be taken outside of normal work hours? ☐ Yes ☐ No

Supervisor Signature: _____ Approval ☐ Yes ☐ No

Employee Services: _____ Approval ☐ Yes ☐ No

Comments: _____

Discount Approval	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

OFFICE USE ONLY:

_____ Tuition _____ Total Due _____ Total Paid _____ Date Received/Initials _____

_____ On-line Late Registration Fee _____ Records _____

_____ On-Campus Late Registration Fee _____

_____ On-line Access & Tech Fee _____

_____ Proctor Fee *Any Online Learning course not using *Examity* _____

_____ Re-enrollment Fee* **Re-enrollment fee only if have not taken classes within the last year.* _____

_____ APF **Undergrad degree only* (Semester amount, divided by 12, multiplied by credit hours) _____

_____ Music Course Fees _____