



Non-Degree Student Registration

Term: Fall Spring Summer Year: _____

Student Information:

AUA ID: _____

Full Name: _____
Last Name First Name Middle Name

Last Name

Cell Phone: _____ Home Phone: _____ E-mail Address: _____

Course(s) you wish to register for:

CRN	Subject Code	Course Number	Course Title	Credits	Section	Approved/ Declined*	Instructor's Signature	Date
						Approved		
						Declined		

Program Chair Signature: _____ Approved Declined* Date: _____

*Please note reason for Decline: _____

CRN	Subject Code	Course Number	Course Title	Credits	Section	Approved/ Declined*	Instructor's Signature	Date
						Approved		
						Declined		

First Name

Program Chair Signature: _____ Approved Declined* Date: _____

*Please note reason for Decline: _____

CRN	Subject Code	Course Number	Course Title	Credits	Section	Approved/ Declined*	Instructor's Signature	Date
						Approved		
						Declined		

AUA ID

Program Chair Signature: _____ Approved Declined* Date: _____

*Please note reason for Decline: _____

CRN	Subject Code	Course Number	Course Title	Credits	Section	Approved/ Declined*	Instructor's Signature	Date
						Approved		
						Declined		

Program Chair Signature: _____ Approved Declined* Date: _____

*Please note reason for Decline: _____

Please Note: Credits taken as a non-degree student may be applied toward only 25% of the total credits required for a given degree. Tuition payments should be done as described in the contract.

Student's Signature: _____ Date: _____

Registration is effective upon signature of the Registrar

For Office Use Only

Registrar Signature: _____ Date: _____