EASTERN UNIVERSITY
CLASS REGISTRATION FORM

SESSION: [ ] FALL [ ] SPRING [ ] SUMMER I [ ] SUMMER II

Ethnicity, denomination, gender, marital status and birth information requested in this form is needed by the university and government for statistical purposes. The information will not be used in an unlawful manner. Your response to these questions is voluntary.

NAME: _____ ID NUMBER (IF KNOWN) OR SS # _____

** For Address Changes, please submit an Address Change Form (available for download on the Registrar's Web Page)*

E-MAIL _____ BIRTH DATE ____/_____/_____ GENDER: [ ] MALE [ ] FEMALE

MONTH DAY YEAR

INTENDED DATE OF GRADUATION _____ MAJOR OR PROGRAM _____
month year

NAME TO BE PRINTED ON DIPLOMA _____

CITIZENSHP: [ ] U.S. CITIZEN [ ] OTHER_____

ETHNICITY: [ ] BLACK, NON-HISPANIC [ ] ASIAN OR PACIFIC ISLANDER [ ] HISPANIC

[ ] WHITE, NON-HISPANIC [ ] AMERICAN INDIAN OR ALASKAN NATIVE

RELIGIOUS DENOMINATION:_____

ONLINE	DEPT	COURSE NUMBER	SECTION NUMBER	TITLE	COURSE HOURS	MEETING DAYS	MEETING TIMES

ALTERNATIVE COURSES MUST BE LISTED

_____ _____ _____

STUDENT SIGNATURE ADVISOR SIGNATURE DATE

NOTE: Submission of this registration form obligates you to pay tuition and fees for all courses for which you are registered at the beginning of the academic session. Notification of registration change or cancellation must be submitted in writing to the Registrar.