

Andrews University

Berrien Springs, MI 49104

Permission to Take Classes / Registration Form

Term: _____

(Please answer ALL questions)

ID Number:

| | | |
|---------------|-----------|---------------|
| | | |
| Month Date | Day of | Year Birth |

1. _____
 First Middle Maiden Last (Surname) Social Security Number

2. Permanent Home Address _____
 Street/Box City State Zip Home Phone

County of residence if from Michigan _____

3. Male Female Place of Birth _____
 City State Country

4. Single Married Divorced Separated Widowed

5. Formal Education Completed: High School Bachelors Masters Doctoral

6. Have you attended Andrews University before? Yes No

If yes, please fill in the following: ID # _____ Attended: On Campus Extension School

What term did you last attend: Summer _____ Autumn _____ Winter _____ Spring _____

7. Are you currently working on a degree at Andrews University? Yes No

If yes, Degree _____ Major _____ Date of Completion _____

8. U.S. Citizen Immigrant Student Visa Exchange Visitor Visa Overseas Extension School

9. S.D.A. Membership: Yes No If yes, which Conference/Division _____

10. Ethnic origin (This information is requested for government statistics and is used for statistical purposes only)

Your racial/ethnic group: American Indian (1) African-American (2) Oriental American (3)

Spanish Surnamed American (4) Caucasian American – Non-Hispanic Origin (5)

11. Courses:

| PREFIX | NUMBER | SEC | NAME OF COURSE | CREDITS | REG | COMP |
|--------|--------|-----|----------------|---------|-----|------|
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The granting of this application for Academic Credit does not constitute admission into any degree program at Andrews University.

Signature _____ Date _____