

# Fall 2009 Part-Time Mail Registration Form

Individuals may use Mail-In Registration by providing the information requested and mailing the form to the campus address you will be attending (see page 4 for addresses).

**Only students registering for 11.5 credit hours or less may use the Mail-In procedure.**

You will be sent a copy of your schedule/bill for the courses for which you are registered. (*processing time 5 days*) Dropping of courses must be done in person at the campus where your courses are scheduled. (*Refer to add/drop dates in the course schedule.*)

## Mail Registration Available Between: April 27 - July 30

**PLEASE PRINT LEGIBLY OR TYPE (MUST BE FILLED IN COMPLETELY)**

Name: \_\_\_\_\_  
Last Name
First Name
Middle Initial

Street: \_\_\_\_\_ Apt: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell \_\_\_\_\_ E-mail: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Do not submit this form without your SS)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender:  Male  Female

Are you a NY State resident?  Yes  No If yes, for how long? \_\_\_\_ / \_\_\_\_  
Years Months

Are you a resident of Erie County?  Yes  No If yes, for how long? \_\_\_\_ / \_\_\_\_  
Years Months

1.  US Citizen    2.  Permanent Resident (Alien Registration Number A) \_\_\_\_\_

3.  Foreign Student from: \_\_\_\_\_ Visa Type: \_\_\_\_\_ Expires: \_\_\_\_/\_\_\_\_

English is not my primary language, my primary language is: \_\_\_\_\_

High School you currently attend or last attended: \_\_\_\_\_  
Name
Address

In what year \_\_\_\_\_

Previously attended college at: \_\_\_\_\_

Dates attended: \_\_\_\_\_

Have you been convicted of a felony  Yes\*\* (F1)  No

Have you been dismissed from a college for disciplinary reasons  Yes\*\* (F2)  No

\*\*If yes to either question, Admissions will send you additional information and instructions.

An affirmative response to either question will not automatically prevent admission, but you will be asked to provide additional information. This information will be reviewed by a campus committee to ensure campus safety. Any falsification or omission of data may result in denial of admission or disciplinary action.

Demographics (please check mark all that apply)

White, not Hispanic     Black, not Hispanic     Hispanic     Asian/Native Pacific Islander

American Indian or Native Alaskan - Tribe: \_\_\_\_\_

STUDENT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

EX.	Synonym Number	Course Number	Section Number	Credit Hours
	34567	AA100	0B	3.0
1				
2				
3				
4				

**Mail must be received by July 30**