



Office of Admissions and the Registrar

REGISTRATION FORM

P _____ Office use only

NAME: _____ **UA ID (or SSN):** _____
 Please print (Last) (First) (MI)

Previous names used at the University of Alaska: _____

SEMESTER OF ENROLLMENT: Year 20__ __ Fall Spring Summer **Date of Birth (MM/DD/YYYY):** _____

CURRENT MAILING ADDRESS: _____ Email Address: _____
 _____ Phone: _____
 _____ **Cell Phone #:** _____
 (City) (State) (Zip)

YES! Please text me class information updates.

DEMOGRAPHIC INFORMATION:

Your response helps us better serve students and impacts NWC's eligibility for some funding sources. See Page 2 for information and codes.

Sex: Male Female Prefer not to answer Ethnicity: Hispanic or Latino Not Hispanic or Latino
 Race: _____ Vet/Military Status?: _____
 US Citizen? Yes No If no, Nation of birth: _____ Nation of citizenship: _____
 Visa Type: _____ Permanent Resident? Yes No

For instructions on withholding directory information, please see INFORMATION RELEASE on reverse side³.

PRIOR EDUCATION INFORMATION

Did you graduate from high school?

Yes Graduation date? (MM/Year): _____ Name of high school: _____
 High School location: (city/state): _____

No If NO, did you complete the GED? Yes No
 Date GED completed? (MM/Year): _____ Location of GED (state): _____

COURSE INFORMATION (Complete all information requested below. Refer to the class schedule on UAOnline for course information)

CRN	Dept.	Course Number	Section	Course Title	# of Credits	"Yes" if Audit	Instructor Signature (required after last day of late registration)

I understand I am responsible for all applicable UAF academic regulations, tuition and fees whether or not I successfully complete the course or courses in which I am enrolling. The university may drop me for non-payment.⁴

I promise to pay attorney's fees and other reasonable collection costs necessary for the collection of any amounts owed UA. If I do not pay, the university may take my Permanent Fund Dividend under Alaska Statutes 14.40.251 and 43.23.073.

Student's Signature _____ **Date:** _____

Advisor's Signature (for degree-seeking students only): _____ **Date::** _____

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Processed By: _____ Date: _____

SUBMIT THIS COMPLETED FORM TO:

UAF Northwest Campus

FAX: (907) 443-5602

EMAIL: nwc.info@alaska.edu

QUESTIONS?

Contact us! We are ready to help.

(907) 443-2201 or 1-800-478-2202

nwc.info@alaska.edu



¹ RACE*

Code Description

AA	Alaska Aleut
AE	Alaska Eskimo, Other/Unspecified
AH	Alaska Indian, Haida
AI	Alaska Indian, Other/Unspecified
AK	Alaska Indian, Tlingit
AM	Alaska Indian, Tsimshian
AN	Alaska Native, Other/Unspecified
AQ	Alaska Eskimo, Inupiaq
AS	Alaska Native, Southeast
AT	Alaska Indian, Athabascan
AY	Alaska Eskimo, Yup'ik
BL	Black, Non-Hispanic
IN	American Indian (Not Alaska Native)
NH	Native Hawaiian or Other Pacific Islander
SI	Asian
UN	Unspecified
WH	White

* Requested for compliance with Title IV of the Civil Rights Act of 1964.

² VETERAN/MILITARY STATUS

Code	Description
Blank	Non-veteran
FMAI	UAF Air Force Student
FMAR	UAF Army Student
FMCO	UAF Coast Guard Student
FMDP	UAF Military Dependent
FMIL	UAF Military Student
FMMA	UAF Marine Corps Student
FMNA	UAF Navy Student
FVDP	UAF Veteran Dependent
FVET	UAF Veteran Student



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³ INFORMATION RELEASE

FERPA

The Office of Admissions and the Registrar is responsible for keeping student education records. The full copy of the university's policies regarding access to student records under the Family Educational Rights and Privacy Act of 1974 (FERPA) are available at www.alaska.edu/student-services/ferpa/.

Directory Information

The university may release certain directory information to the public on a routine basis unless a student requests, in writing, that the university not release it. Forms to request that directory information not be released are available in the Office of Admissions and the Registrar.

No directory information will be released until the last day of late registration. Any request to withhold directory information will continue until a student provides permission, in writing, for the university to release such. After that, information will be released when appropriate. The names of students who have requested their directory information be withheld will not appear in the published university chancellor's and dean's lists.

The following is considered directory information:

1. Name
2. Email address
3. Home city and state
4. Weight and height of students on athletic teams
5. Dates of attendance at UAF
6. Program/major field(s) of study
7. Degrees and certificates received, including dates
8. Participation in officially recognized university activities
9. Academic and co-curricular honors, awards and scholarships received, including dates

⁴ LATE PAYMENT/REINSTATEMENT FEES

Cover payment for your class by the payment deadline to avoid late fees, drops for non-payment, and reinstatement fees.

For more information about fees, contact the Office of the Bursar at 907-474-7384.