

NLU REGISTRATION FORM

FOR OFFICE USE ONLY
 Student Accts Appr _____
 D.P. _____

NLU ID: _____

SELECT TERM:

LAST NAME: _____

Fall Winter Spring Summer 20 _____

FIRST/MIDDLE NAME: _____

BIRTH DATE: _____ GENDER: M F

MAIDEN (if applicable): _____

ETHNIC BACKGROUND: Hispanic or Latino Non-Hispanic or Latino
 (If Non-Hispanic or Latino please check a Race category)

Check if new name or address since last registration

RACE: American Indian or Alaskan Native Black or African American

STREET ADDRESS: _____

Native Hawaiian or Other Pacific Islander

CITY: _____ STATE: _____ ZIP: _____

Asian White

HOME/CELL PHONE: (_____) _____

Graduate students: if you have a fellowship or doctoral scholarship, please indicate: Fellowship Doctorate

BUSINESS PHONE: (_____) _____

Graduate students: do you have a bachelor's degree from an accredited institution? Yes No

E-MAIL ADDRESS: _____

SSN (only if a first-time registrant): _____

Are you admitted to an NLU program? Admitted Not Admitted

I am a new NLU student I am a returning NLU student

In the College of Education a maximum limit of nine semester hours of NCE/NLU credit taken as a special student prior to formal admission may apply toward a Master's Degree, Educational Specialist Degree or Certificate of Advanced Study.

ALL INFORMATION MUST BE COMPLETED OR FORM WILL BE RETURNED TO YOU

The undergraduate unit of credit is the quarter hour; the graduate unit of credit is the semester hour.

CRN NUMBER	COURSE NUMBER	COURSE TITLE	QTR or SEM HRS	For extension courses, list site

Student's Signature _____

Date _____

Advisor Signature (Required for Undergraduates) _____

Date _____

Return to: Office of the Registrar, National-Louis University, 1000 Capitol Dr., Wheeling, IL 60090; (Fax) 312.261.3044 (Undergraduate ONLY) or (847) 465.4746 (Graduate ONLY)

CREDIT CARD CHARGE AUTHORIZATION

I hereby authorize National-Louis University to charge my Visa/Mastercard/American Express/Discover Card charge account with the amount shown below, which represents tuition and/or fees due to the university.

Circle: VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Cardholder's name (print): _____

Charge number: _____

Amount: \$ _____ Exp. Date: _____

Cardholder's signature: _____

Student name (print): _____

NLU ID: _____ Today's date: _____

Phone number: _____