COURSE REGISTRATION

1	2	3	Year
Spring	Summer	Fall	2019

UNIVERSITY of ALASKA ANCHORAGE

School of Education
Professional and Continuing Education (P.A.C.E.)

3211 Providence Drive, PSB 221
Anchorage, AK 99508-8295

Phone: 786-1934 Fax: 786-1931
Email: pace@alaska.edu

UA Student ID#	Previous or Maiden Name:	Gender: Male Female

FULL LEGAL NAME

(Last) (First) (M.I.)

Mailing Address Home Phone

City State Zip Daytime Phone

Email:

ETHNIC ORIGIN
Ethnic origin is requested for compliance with Title IV of the Civil Rights Act of 1964. Used for statistical purpose only.

- **AA Alaska Native-Aleut**
- **AQ Alaskan Native - Inupiaq**
- **AH Alaskan Native - Haida**
- **AY Alaskan Native - Yupik**
- **AT Alaska Native - Athabascan**
- **AS Alaskan Native - Southeast**
- **AK Alaskan Native - Tlingit**
- **AM Alaskan Native - Tsimpsian**
- **AN Alaskan Native - Other**
- **IN American Indian-Not AK Native**
- **SI Asian**
- **BL Black or African American**
- **NH Native Hawaiian or other Pacific Islander**
- **WH White - Non-Hispanic**
- **OT Other**

Improving the educational experience of Alaska's children…

Birthdate: _____ _____ _____
Month Day Year

High School: Diploma GED Foreign Equivalent Did not graduate

Name of High School or GED Test Center: _____

City: _____ State: _____ H.S./GED Grad. Date: Mo/Yr _____

Veteran Military Code:

ADA	Active Duty - Army
ADAF	Active Duty - Air Force
ADCG	Active Duty - Coast Guard
ADM	Active Duty - Marine
ADN	Active Duty - Navy
ADNG	Active Duty - National Guard
ADO	Active Duty - Other
ADDC	Dependent Child

Residency:
Resident Active Military Non-Resident

Citizenship:
US Other

If other, please list: _____

Foreign Student VISA Type:
F1 Permanent Resident Other

What is your goal at UAA?

- A Associate Degree
- B Baccalaureate Degree
- C Certificate
- G Graduate Program
- H High School Completion
- M Maintain License/ Certification
- J Job Change/Improvement
- P Personal Development
- O Other

UAA OFFICE USE ONLY

Date Entered: _____

Initials: _____

UAA ACCOUNTING ONLY

Date: _____ By: _____

Batch No: _____

CRN	Subject	Course	Section	Date(s)	Course Title	Credits	Grading	Fee
52053	ED	581	403	6/3/2019 - 6/17/2019	Science Education: Birds of Wonder Lake	2	P/NP	$ 94

TOTAL $ _____

I understand that by submitting this registration, I am responsible for the tuition and fees associated with any course(s) for which I have registered. I am responsible for dropping courses by published deadlines to ensure charges are not incurred. I understand that if I default on this student account, I am responsible for the collection, attorney and legal fees. The University may garnish my Alaska Permanent Fund Dividend under Alaska Statutes 14.40.251 and 43.23.073. I also understand that the past due debt may be reported to credit bureaus.

Drop/Refund requests must be received by and withdrawal requests must be received by . I am responsible for notifying PACE to ensure that my drop/withdrawal is processed.

Student
Signature **X** _____ Date: _____

Payment Options

- Credit card payments* can only be made through your UAOnline student account: https://uaonline.alaska.edu

  ***A 2.85% non-refundable service fee ($3 minimum) will be charged for credit card payments.**

- To avoid the service fee, you can pay by e-check via UAOnline, mail a check to the address above, or pay by check in person at UAA Cashiering.

Payments cannot be made until your registration form has been received and processed

UA is an AA/EO employer and educational institution and prohibits illegal discrimination against any individual: www.alaska.edu/titleIXcompliance/nondiscrimination.