

## ENROLLMENT FORM

### CONTACT INFORMATION

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_ Today's Date: \_\_\_\_\_



### ACADEMIC STANDING (PLEASE CHECK ONE)

I am already a degree seeking student at the University.

Student ID #: \_\_\_\_\_

I am currently admitted to the University as a Special Adult Student.

I am new to the University; please send me information about being admitted.

### VOLUNTARY INFORMATION COLLECTED TO ENHANCE OUR PROGRAMMING



#### Gender:

Male  Female

#### Age:

Under 18  18-34  35-49  50-64  65+

#### Heritage:

Black  Hispanic  Asian/Pac. Islander  White  Am. Indian or Alaskan Native

#### Occupation:

Agriculture/Forestry

Educational Services

Engineering, Architecture, Surveying

Finance, Insurance, Real Estate

Health Services

Manufacturing

Protective Services

Public Administration/Government

Retail Trade

Social, Recreational, Religious Services

Transportation, Communication, Utilities

Wholesale Trade

Other \_\_\_\_\_