

**UNIVERSITY OF ALASKA SOUTHEAST • (907) 747-6653**

**CAMPUS**

- ☐ Juneau
- ☐ Ketchikan
- ☐ Sitka
- ☐ Distance

**SEMESTER/YEAR**  
☐ Spring  
☐ Summer  
☐ Fall 19

**Birthdate****Evening/Message Phone**

Daytime Phone

**Personal information** includes your name, dates of attendance and current class standing, major field(s) of study, degrees and awards received, including dates and participation in officially recognized activities. If you wish the university to keep this information confidential, please check "no."

**DISABILITY OR SPECIAL NEED?** Please call 465-6439 for information..

City/State/ZIP	Previous Name	HIGH SCHOOL: STATE	MONTH/YEAR GRADUATION	HIGH SCHOOL NAME (AK ONLY)

**Residency:** ☐ Alaska Resident (one year or more) State of Residence (if not Alaska):

**ETHNIC ORIGIN:** (optional—for statistics only)

**Citizenship:** ☐ U.S. Citizen ☐ Resident Alien ☐ Non-Res. Alien (if not U.S.)

☐ Black      ☐ Caucasian      ☐ Hispanic      ☐ Asian/Pacific Islander

**Veteran Military Codes (circle one)**

<b>AA</b>	Active Duty	<b>DS</b>	Dependent Spouse
<b>DC</b>	Dependent Child	<b>VN</b>	Vet Not Eligible VA Benefits
<b>VR</b>	Vet Receiving VA Benefits		
<b>AF</b>	Active Duty - Air Force	<b>AN</b>	Active Duty - Navy/ Marine
<b>AC</b>	Active Duty	<b>AO</b>	Active Duty - Other
<b>WW</b>	Widow/ Widower	<b>MR</b>	Non-Active Duty - Dependents, Retirees, Department of Defense

**SEX:** (optional): ☐ Female ☐ Male

[illegible]**TOTAL CREDITS**

High School Student

I assume full academic and financial responsibility for this program. If funded, I give my permission to release my student records to the funding agency. I certify the above information is true and accurate.

- ☐ Non-Degree Seeking
- ☐ Degree/Certificate Program

PARENT SIGNATURE \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

ADVISOR SIGNATURE

DATE \_\_\_\_\_

DEAN'S SIGNATURE

**Office Use Only**

Tuition: \$

Non-Resident: \$

Lab Fees: \$

Stud. Govt. Fees: \* \$

Other: \$

Total charges: \$

Payment ☐ Cash ☐ Check☐ Credit Card

Total Rec'd.: \$

Balance Due: \$

Charge to:

Rec'd. by:

Date:

\* Non-Refundable