

Graduate Webster University Registration Form

NAME		SSN	
STREET		CITY	
STATE		ZIP	
HOME #		WORK #	
GRAD DATE		STUDENT ID #	

Are you a: NEW Student? _____ Returning Student? _____ NON-Degree? _____

If this is your last term, please make an appointment with the Academic Advisor to complete a Petition to Graduate. This MUST be completed before beginning your last term.

Employer Name	
E-Mail Address	

DEGREE TYPE: MA _____ MBA _____

AREA OF EMPHASIS:

HRMG _____ HRDV _____ COUN _____ MGTL _____ HLTH _____

**If DUAL, please check both*

PAYMENT OPTIONS: (CHECK ALL THAT APPLY)

Direct billing to: EMPLOYER, CHAPTER 31 VOC REHAB, and JPTA. A copy of the authorization to bill employer must be supplied to this office. The student must pay any portion not covered by payer.

Employer Reimbursement – Payable to the student. A copy of authorization must be on file. The student must pay any portion not covered by payer.

AES – Advanced Education Services (deferred payment plan). Student must complete additional paperwork online to sign-up for services.

Financial Aid, Student Loans, Grants and Scholarships

Payment in full- Credit Card _____ Ck. Pmt. _____ Ck. # _____ Total Paid _____

VA Benefits

Course Name & Number	SECTION #	COURSE TITLE	DAY OF WEEK	SESSION (SPRING 1 OR SPRING 2)
<i>EXAMPLE ONLY BUSN 3000</i>	<i>5A</i>	<i>Example BUSINESS</i>	<i>Example Thursday</i>	<i>SPRING 2, 2007</i>

STUDENT SIGNATURE		DATE	
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***All STUDENTS ARE ENCOURAGED TO REGISTER IN PERSON.
WWW.WEBSTER.EDU/SOUTHCAROLINA/COLUM**

FORM MUST BE FILLED OUT COMPLETELY FOR PROCESSING