

Webster University Greenville Undergraduate Registration Form Spring 2010

*****TO AVOID GRADUATING LATE, ABIDE BY YOUR PROGRAM PLANNING WORKSHEET.
THIS IS YOUR RESPONSIBILITY AND IS NO LONGER BEING
MONITORED BY THE FRONT OFFICE!!!*****

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

Is this your last term? YES _____ NO _____

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. You will NOT receive a diploma or degree conferred transcript WITHOUT completing a petition to graduate.

Employer Name	
E-Mail Address	

DEGREE TYPE: BA _____

AREA OF EMPHASIS: MNGT _____ PSYC _____

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.

___ Student loans **(MUST REGISTER FOR SPRING 1 & 2 AT THE SAME TIME)**

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

___ VA Benefits

Course Name & Number	SECTION #	COURSE TITLE	DAY OF WEEK	SESSION (SPECIFY SPRING 1 OR SPRING 2 TERM)
EXAMPLE ONLY COMP 5000	54	COMP RES & INFO MNGT	MONDAY	SPRING 1
STUDENT SIGNATURE			DATE	

SIGNED REGISTRATION MAY BE FAXED TO 864-676-0601 OR E-MAILED TO KATHY AT
KCHILDRESS62@WEBSTER.EDU.

* ALL INFORMATION MUST BE INCLUDED IN YOUR E-MAIL OR FAX OR IT WILL BE RETURNED TO YOU
WITHOUT BEING PROCESSED.

NEW STUDENTS ARE ENCOURAGED TO REGISTER IN PERSON.
WWW.WEBSTER.EDU/GREENVILLE