

Alfred University

SUMMER TERM REGISTRATION FORM

AU ID No. _____
(If one has been assigned)

Date: _____

Name _____ / _____
Last First Middle Maiden/Former

Phone (with area code): _____ Cell Phone: _____

Current Email Address: _____

Have you ever attended Alfred University? Yes: Graduate Undergraduate No

Are you applying for Tuition Remission? Yes – I am an eligible AU employee or dependent No

NOTE: if you answered NO to BOTH of the above questions, you must complete the “New Record Only” section, below.

Do you receive employer reimbursement? Yes No If Yes, Employer: _____

Are you now in a degree program at AU? Yes: **Register online using AU BannerWeb** <https://banweb.alfred.edu>
 No – I am not a degree-seeking student at Alfred University

Do you have a bachelor’s degree? Yes, from: College/University _____ Mo/Yr _____
 No

Course and Section Information				Course Title	Credit Hours	Instructor
CRN	Subject	Course No.	Sec. No.			

I accept financial responsibility for all charges incurred at Alfred University in connection with my registration.

Student's Signature

Date

New Record Only:

Social Security No. _____ Date of Birth: _____ Gender: Male Female
MM/DD/YYYY

Predominant Racial/Ethnic Identification: (Optional) American Indian/Alaskan Native Asian Pacific Islander
 Black or African American/Not Hispanic White/Not Hispanic Hispanic Two or More Races

Citizenship: U.S. Citizen Non-Resident Alien

If you are *not* a U.S. Citizen, please check the appropriate box below:

Permanent Resident “A” number: _____

Refugee “A” number: _____

I am an F-1 student seeking a degree at a different U.S institution. If checked, and the class(es) listed above are on our campus (not online), please have your campus DSO at your sponsoring institution complete and sign this section:

I, _____, a Designated School Official at _____
affirm that the student named above [SEVIS I.D.: _____] is a current F-1 student in good standing at this time.

Signature: _____ Date: _____

Permanent Address:

Emergency Contact:

Name

Relationship

Area Code/Phone

**Mail, fax, or bring this completed registration form to: Student Service Center, One Saxon Drive, Alfred, NY 14802
Telephone: (607) 871-2123 • Fax: (607) 871-2347**

Those registering at AU for the first time must also submit a completed immunization form to Wellness Services. The Immunization Form, along with instructions for completion and submission, is accessible at <http://www.alfred.edu/summer/term/general.cfm>.