

SEMESTER-BASED COURSE ENROLLMENT FORM

Mizzou Online, University of Missouri

136 Clark Hall, Columbia, MO 65211

573-882-2491 or 1-800-609-3727 * FAX 573-882-5071

REGISTRATION AVAILABLE ONLINE AT <http://online.missouri.edu>

PLEASE PRINT (IN INK) OR TYPE Completion of this form does not assure admission to the University or its degree programs. All course registrants are subject to University policies, including refund policies. Failure to complete this form fully and accurately will delay your enrollment.

Legal name _____ MU student number _____

Last Date of birth _____ First Place of birth _____ Middle _____ Previous/Former _____
Date of birth: mm / dd / yyyy City _____ State _____ Country _____ Citizen of the U.S.? yes no
If no, specify country of citizenship _____

If not a U.S. citizen, please choose one of the following: Non-citizen permanent resident of the U.S. Non-citizen (F or J visa status)

Missouri resident? yes no Veteran of the U.S. Armed Forces? yes no

The next three items are optional. The information is used for purposes of reporting to Federal Compliance Agencies only. It will not be used in a discriminatory manner..

Gender female male Ethnicity Hispanic or Latino Non-Hispanic or Non-Latino Race American Indian or Native Alaskan Hawaiian/Pacific Islander Asian (Includes Chinese, Filipino, Japanese, Korean, Thai and Asian Indian) Asian (Other) Black or African-American White/Caucasian

Permanent mailing and contact information

Number & street _____ Apt./box number _____ County _____ Evening telephone _____
City _____ State _____ ZIP/Postal code _____ Country _____ Day telephone _____
E-mail address (required for Internet courses) _____ Fax number _____

ACADEMIC INFORMATION

Previously enrolled at MU or in Mizzou Online courses? yes no If yes, when? _____

Enrolling as undergraduate graduate Applying to a degree program at MU? yes no

Graduate of MU? yes no Number of undergraduate semester hours completed 0-29 30-59 60-89 90-120

Bachelor's degree information: Degree _____ Month/year awarded _____ Name on transcript _____

Institution Name _____ Location (city/state) _____

Official bachelor's degree transcript on file at MU? yes no requested

To receive graduate-level credit for this course, you must have an official transcript of your bachelor's degree on file at MU. If your bachelor's transcript is not on file, ask the institution awarding the bachelor's degree to send your transcript directly to: Mizzou Online, 136 Clark Hall, Columbia, MO 65211-6300.

I understand that my enrollment will be processed upon receipt of my transcript.

PAYMENT INFORMATION University credit course fees will be billed through the University's Cashiers Office.

Third-party billing Payer: _____ Contact person: _____

An official letter of authorization is required. Payer's e-mail address: _____

Payer's billing address: _____

City: _____ State: _____ Zip code: _____

List below Mizzou Online credit courses desired this term. (Compliance with prerequisites is the student's responsibility.)

Semester or Term	Department & Catalog Number	Section Number	Class Number	Course Title	Letter Grade/Audit	Credit Hours	Graduate or Undergraduate

Legal signature (in ink) _____ Date _____

I authorize the University to maintain all my records under this name.