

Graduate Programs in Education Off-Campus Course Registration

PART ONE—STUDENT INFORMATION Compl	ete ALL PARIS of this form. Please PRINI.
SOCIAL SECURITY NUMBER	
LEGAL NAME First	Middle
Last	
MaidenOther	
MAILING ADDRESS Street/RR/PO Box	
City State _	Zip
Home Phone () Work ()	
Email Address (Personal)Email Address (Work)	
PERMANENT ADDRESS (if different from above) Street/RR/PO Box	
City State _	Zip
DATE OF BIRTH / /	142
GENDER Female Male MARITAL STATUS Single Marr	ried
CITIZEN STATUS U.S. Citizen Resident Alien Refugee/granted p	
□ Non-resident Alien Of what country are you a citizen?	·
RACE AND ETHNIC BACKGROUND (answer both questions)	RELIGIOUS PREFERENCE
Are you Hispanic or Latino/Latina? No, not Hispanic or Latino/Latina	☐ Baptist
☐ Yes, Hispanic or Latino/Latina	☐ Catholic
What is your race? (select one or more)	□ Jewish □ Lutheran
☐ American Indian or Alaska Native	☐ Methodist
☐ Asian (country of family's origin) ☐ Black or African American	None
☐ Native Hawaiian or Other Pacific Islander	☐ Other
☐ White	
HIGHEST DEGREE HELD	
Degree Degree Charles	Name/Location of College or University
HAVE YOU PREVIOUSLY EARNED CREDITS FROM VITERBO UNIVERSITY (formerly Viterbo College)? Yes No EMPLOYER (School name and district) Grade Level	
Catholic Parochial School Teacher Yes No	
- 4 - 2 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3	
PART TWO—COURSE REGISTRATION INFOR	MATION
7.10.00.1	L.C. The Live of the Control of the
EDUC Course # 548-004 Section # Course Title Google Tool	
LOCATION _ CESA #12 INSTRUCTO DATES Start Date _11 / _03 / _14 End Date _12 / _08	
DATES SCART Date 11 / 03 / 14 End Date 12 / 08	
I certify that all information in this course registration is complete and accurate to the	best of my knowledge.
Signature	Date
Viterbo University is committed to providing equal educational and employment opportunational origin, or handicap in compliance with Title VI, Title IX, and section 504.	rtunities regardless of sex, race, color, religion, age,
PLEASE ALLOW A MINIMUM OF 6 WEEKS FROM THE COMPLETION O REPORTS AND TRANSCRIPTS ARE AVAILABLE. TRANSCRIPT REQUES OFFICE OF THE REGISTRAR. VETERAN BENEFITS ARE NOT AVAILABLE Visuals a University Officerous Computer.	TS MUST BE MADE, IN WRITING, TO THE LE FORTHIS COURSE.

Wisconsin: 2323 South 109th Street, Suite 375, West Allis, WI 53227 • 414-321-4210 or 800-234-8721 • FAX 414-321-9113

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