

# Credit Course Registration Form • University of Virginia School of Continuing and Professional Studies

All sections **must** be completed. Supporting documents and additional information may be required.

Section One: Personal Information				Section Two: Highest Level of Education Completed																															
Today's date _____ Have you enrolled previously in a U.Va. credit course? <input type="checkbox"/> Yes <input type="checkbox"/> No How did you learn about the current course? _____ Social Security Number* _____ Email address _____ Last name _____ First name _____ Middle Initial _____ Suffix (Jr., Sr., II) _____ Occupation _____ Organization/Company/School _____ <input type="checkbox"/> Check here if you are a U.Va. employee and are registering under the U.Va. Education Benefits Plan. Home street address _____ City _____ State or Country _____ ZIP _____ Home phone _____ Business phone _____ Cell phone _____ Birth Date** MM DD YY Gender <input type="checkbox"/> M <input type="checkbox"/> F Race or Ethnicity (optional)* _____				(check one) <input type="checkbox"/> 0 Not High School Graduate <input type="checkbox"/> 1 High School Graduate <input type="checkbox"/> 2 College 1/2 <input type="checkbox"/> 3 College 3/4 <input type="checkbox"/> 4 Bachelor's Degree <input type="checkbox"/> 5 Master's Degree <input type="checkbox"/> 6 Doctoral Degree <input type="checkbox"/> 7 Postdoctoral Study <input type="checkbox"/> 8 Other _____																															
Section Four: Registration and Payment				Section Three: Degree or Certificate Program Status																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Schedule Number</th> <th style="width: 15%;">Course Mnemonic</th> <th style="width: 10%;">Course Number</th> <th style="width: 50%;">Course Title</th> <th style="width: 10%;">Credit Hours</th> <th style="width: 5%;">Tuition &amp; Fees</th> </tr> </thead> <tbody> <tr> <td>98180</td> <td>PSMT</td> <td>601</td> <td>eMarketing Tools (sample)</td> <td>3</td> <td>\$867</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> <p style="text-align: right; margin-top: 5px;"><i>For credit courses, add \$5 per credit hour administrative technology fee.</i></p>				Schedule Number	Course Mnemonic	Course Number	Course Title	Credit Hours	Tuition & Fees	98180	PSMT	601	eMarketing Tools (sample)	3	\$867																			Are you currently enrolled in a U.Va. degree and/or certificate program? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify the programs(s): _____ _____	
Schedule Number	Course Mnemonic	Course Number	Course Title	Credit Hours	Tuition & Fees																														
98180	PSMT	601	eMarketing Tools (sample)	3	\$867																														
<b>Payment must be made at time of registration (check one)</b> <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>Credit card number</span> <span>Exp. Date</span> </div>				Total _____																															
<b>If you are requesting that a business/organization (third party sponsor) be billed for tuition, a letter of authorization must be attached.</b> Students will be billed for their unpaid tuition and fees in the event of default by their sponsor or failure of the student to meet sponsor's criteria. Go to <a href="http://www.scps.virginia.edu/register">www.scps.virginia.edu/register</a> for details on letters of authorization and using purchase orders and corporate credit cards. <input type="checkbox"/> Check from Business/Organization <input type="checkbox"/> Credit Card from Business/Organization <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>Credit card number</span> <span>Exp. Date</span> </div>																																			
Address of Business/Organization			Contact Name																																
Tax ID#		Sponsor Code (to be entered by U.Va.)																																	

## Section Five: In-State Tuition Privileges

Are you claiming Virginia in-state tuition privileges?  Yes  No (If you answered no, skip to Section Six.)

If you answered yes, you **must** complete and sign below to claim in-state privileges, pursuant to Section 23-7.4 Code of Virginia. If you do not complete this section, you will be classified as an out-of-state registrant for purposes of tuition. Additional documentation may be required.

**Part A:** To be completed by the registrant if financially independent or by the registrant's parent, spouse, or legal guardian if the registrant is financially dependent.

How long have you lived in Virginia? \_\_\_\_\_ Years \_\_\_\_\_ Months

Where have you lived (in the sense of physical presence) in the last two years? (No PO Boxes)

Current address \_\_\_\_\_ City/State/Zip \_\_\_\_\_ From (month/year) To (month/year)

Previous address \_\_\_\_\_ City/State/Zip \_\_\_\_\_ From (month/year) To (month/year)

Current employer \_\_\_\_\_ City/State/Zip \_\_\_\_\_ From (month/year) To (month/year)

Previous employer \_\_\_\_\_ City/State/Zip \_\_\_\_\_ From (month/year) To (month/year)

Have you filed a tax return or paid income tax to any state other than Virginia during the past year?  Yes  No

If yes, name state and explain: \_\_\_\_\_

For at least one year immediately prior to the term in which the registrant will enroll, will you have:

Filed a resident tax return or paid resident taxes to Virginia on all earned income?  Yes  No

Been a registered voter in Virginia?  Yes  No

Held a valid Virginia driver's license?  Yes  No

Do you own or operate a motor vehicle?  Yes  No

If yes, has it been registered in Virginia during all of the past year?  Yes  No

Answer this question only if you are a military family.\*

Are you or your spouse currently in the military? If yes, check  self  spouse

Are you currently residing in Virginia?  Yes  No

Are you currently serving on active duty with Permanent Change of Station (PCS) orders to a base in Virginia?  Yes  No

Please show your current PCS orders at time of registration.

**Part B:** To be completed by the parent, spouse or legal guardian of a financially dependent registrant. If the registrant's parents are divorced or separated, the parent living in Virginia must complete Part A and B.

Parent's, Spouse's or Legal Guardian's Information

Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Suffix (Jr., Sr., II) \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_ Marital Status \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Email address \_\_\_\_\_

Citizenship Status:

U.S. Citizen by birth  Permanent residency pending (provide documentation)

U.S. Citizen by naturalization (provide documentation)  Alien (complete International Applicant Information form)

Naturalization pending (provide documentation)

Permanent resident (provide copy of both front and back \_\_\_\_\_ Country of residence \_\_\_\_\_ Visa Type

of Form I-551 and attach)  Other (provide documentation)

Will you have provided over half of the registrant's financial support for at least one year prior to the term in which the registrant will enroll? If yes, parents must complete Part A. If no, registrant must complete Part A.  Yes  No

Will you have claimed the registrant as a dependent on your federal and Virginia income tax returns for the tax year prior to the term in which the registrant will enroll?  Yes  No

Answer this question only if you are military personnel claiming eligibility for your dependent son, daughter, or spouse.\*

Are you active duty military personnel assigned to a permanent duty station in Virginia?  Yes  No

Are you presently residing in Virginia?  Yes  No

If yes, please submit a copy of your active duty military orders reflecting Virginia assignment.

\*The statute now provides in-state tuition privileges where the active duty military personnel is stationed in Virginia, District of Columbia, or a state contiguous to Virginia or District of Columbia.

## Section Six: Citizenship Status

(check one)

**U.S. Citizen**  Yes  No. I am a citizen of \_\_\_\_\_.

**If you are not a U.S. citizen, please forward documentation to the appropriate center to support any of the following options. Documentation is required to complete your registration.**

Lawful Permanent Resident

Asylee or Refugee

Visa Status, indicate type: \_\_\_\_\_

I-485 Pending, receipt number \_\_\_\_\_

Other please explain \_\_\_\_\_

I am enrolling in an online course or program and I will remain outside the U.S. for the duration of the course or program.

To enroll at the University of Virginia a student must be lawfully present in the U.S. based on U.S. federal immigration law, and any visa status held must not prohibit the desired University enrollment.

## Section Seven: Certification and Signature

I certify that the information I have provided is true.

As a student, I agree to abide by the U.Va. Honor Code. Detailed information is available at [www.virginia.edu/honor](http://www.virginia.edu/honor).

Signature of Registrant

Date

Signature of Parent, Spouse or Legal Guardian

Date

\*Provision of your social security number is requested to assist the University in maintaining your records accurately, and to provide you with a personal identification number. Disclosure of your social security number is required by federal law for financial aid and to be eligible for tax credits created by the Tax Payer Relief Act of 1997. The information requested above is for reports that University provides to federal authorities and to other agencies collecting data on equal opportunity. This request is made in accordance with section 2-2-3803 of the Virginia Code and general administrative authority over University operations. The University does not discriminate unlawfully in any of its programs, procedures, or practices against any person on the basis of age, color, disability, national or ethnic origin, political affiliation, race, religion, sex, sexual orientation, or veteran status. The University operates equal opportunity and affirmative action programs for faculty, staff, and students. The University is an EO/AA employer.

\*\*Provision of your birth date provides you access to the University's electronic resources and is necessary for the University to comply with section 23-221 of the Virginia Code, reporting of information to the Virginia State Police for comparison with state and federal sex offender registries.

10/08

## Center Addresses and Phone Numbers

**University of Virginia  
Hampton Roads Center**  
291 Independence Boulevard  
Pembroke Four Building, Suite 418  
Virginia Beach, VA 23462

**University of Virginia  
Northern Virginia Center**  
7054 Haycock Road  
Falls Church, VA 22043-2311

**University of Virginia  
Richmond Center**  
2810 North Parham Road, Suite 300  
Richmond, VA 23294

**University of Virginia  
Roanoke Center**  
108 N. Jefferson Street, Suite 507  
Roanoke, VA 24016

**University of Virginia  
Southwest Center**  
One Partnership Circle  
P.O. Box 1987  
Abingdon, VA 24212

**University of Virginia  
University Center**  
P.O. Box 400764  
Charlottesville, VA 22904-4764

<b>Hampton Roads Center</b>	(757) 552-1880	FAX: 552-1898
<b>Northern Virginia Center</b>	(703) 536-1100	FAX: 536-1172
<b>Richmond Center</b>	(804) 662-7464	FAX: 662-9827
<b>Roanoke Center</b>	(540) 767-6200	FAX: 767-6206
<b>Southwest Virginia Center</b>	(276) 619-4313	FAX: 619-4309
<b>University Center</b>	(434) 982-5313	FAX: 982-5324