



**P.O. Box 2889 • Palmer, AK 99645**  
**PH: 907-745-9746 FAX: 907-745-9747**

# REGISTRATION

1	2	3	20____
Spring	Summer	Fall	
Semester - circle one			Year

**Disability Support:** If you experience a disability and would like information on support services, please contact Student Services at 745-9762 (voice) or 745-9751 (TTY).

**SID or SSN:** \_\_\_\_\_

**FULL LEGAL NAME:**  
\_\_\_\_\_  
(LAST) (FIRST) (M.I.)

**PREVIOUS OR MAIDEN NAME:**  
\_\_\_\_\_

**MAILING ADDRESS:**  
\_\_\_\_\_  
\_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **DAYTIME PHONE:** \_\_\_\_\_

**Where were you when you decided to attend Mat-Su College?**  
\_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**GENDER:**  MALE  FEMALE

**BIRTH DATE:** month \_\_\_\_\_ day \_\_\_\_\_ year \_\_\_\_\_ **AGE:** \_\_\_\_\_

**RESIDENCY:** For tuition purposes, an Alaskan resident is anyone eligible and who has been physically present in Alaska for at least two years.  
 Resident  
 Non-Resident  
 Active Military

**CITIZENSHIP:**  
 U.S.  Other (please list: \_\_\_\_\_)  
 Country of Birth \_\_\_\_\_  
Foreign Student Visa Type?  
 F1  Permanent Resident # \_\_\_\_\_  
 Other (please list \_\_\_\_\_)

**HIGH SCHOOL:**  Diploma  Foreign Equivalent  
 GED  Did not graduate  
High School/GED Graduation Date: \_\_\_\_\_

Name of High School or GED Test Center: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**Ethnic Code:** Ethnic origin is requested for compliance with Title IV of the Civil Rights Act of 1964. Used for statistical purposes only.

AA  Alaskan Aleut IN  American Indian  
AQ  Alaskan Eskimo, Inupiaq BL  Black, Non-Hispanic  
AY  Alaskan Eskimo, Yupik HI  Hispanic  
AE  Alaskan Eskimo, Other PI  Asian, Pacific Islander  
AT  Alaskan Indian, Athabaskan WH  White, Non-Hispanic  
AS  Alaskan Native, Southeast OT  Other  
AM  Alaskan Indian, Tsimpshian SR  Student Refused  
AH  Alaskan Indian, Haida  
AK  Alaskan Indian, Tlinget  
AI  Alaskan Indian, Other/Unspec  
AN  Alaskan Native, Other

**Military Code:**  
Please check codes that apply.

ADA  Active Duty Army  
ADAF  Active Duty Air Force  
ADCG  Active Duty Coast Guard  
ADDC  Active Duty Dep Child  
ADDS  Active Duty Dep Spouse  
ADM  Active Duty Marines  
AND  Active Duty Navy  
ADNG  Active Duty Natl Guard  
ADO  Active Duty Other

**What is your goal at MSC/UAA?**

A  Associate Degree  
B  Bachelor's Degree  
C  Certificate  
MA  Master's Program  
H  High School Grad  
M  Maintain License/Cert  
UJ  Job Change/Improvement  
T  Transfer to another univ  
P  Personal Development  
D  Doctorate  
XO  Other

**Highest level of schooling:**

NON  Non-High School Grad  
GR2  Associate Degree  
CHS  Concurrent High School  
GR4  Bachelor's Degree  
GED  GED  
PBC  Post-Baccalaureate Cert  
HSG  High School Grad  
PB  Post-Baccalaureate  
SCL  Some College  
DPD  PhD/Professional Degree  
GRC  1-year Certificate  
GC2  2-year Certificate  
MST  Master's Degree  
GRG  Graduate Program

## RECORDS USE ONLY

ID checked \_\_\_\_\_  
Date Entered \_\_\_\_\_ Initials \_\_\_\_\_

## ACCOUNTING USE ONLY PAYMENT BY:

CASH Date: \_\_\_\_\_  
 CHECK Cashier: \_\_\_\_\_  
 CREDIT CARD Receipt # \_\_\_\_\_

\_\_\_\_ VISA \_\_\_\_ MC  
CC No. \_\_\_\_\_

Credit Card Exp. Date: Mo. \_\_\_\_\_ Yr. \_\_\_\_\_  
Cardholder Name: \_\_\_\_\_  
Cardholder Address: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date \_\_\_\_\_ Phone \_\_\_\_\_

CRN	SECTION	SUBJECT	COURSE NO.	COURSE TITLE	CR/AU	DAY	INSTRUCTOR'S SIGNATURE	DATE
61505	P31	ENGL	A111	EXAMPLE: Meth. of Written Comm.	3	T		

**I understand that I am financially liable for all tuition and fees whether or not I successfully complete the course.**

**X**

STUDENT SIGNATURE

DATE