

NONMATRICULATED (NM)

This form is dynamic. Simply type in your information, and your fees will be automatically calculated. Then just print out the completed form. If you prefer to fill out the form by hand, you may print it out now without entering any data.

GRADUATE NONMATRICULATED (GNM)

Quarter\_

NM
GNM

\_Year **20**\_

STUDENT REGISTRATION

 ☐ GNM

Please print or type. See below for instruction		ong with a Registration	on Approval For	m for each	class, to l	UW Continuum	College Re	gistration Service	es.			
For additional forms and information, visit the UW Non-Degree website at: <a href="https://www.nondegree.uw.edu">www.nondegree.uw.edu</a> .												
To request disability ac	commodatio	ns, contact the UW [	Disability Servic	es Office a	t 206-543	-6450 or <u>dso@</u>	<u>uw.edu</u> .					
Social Security Number (Indicate if none exists)* Date of Birth (Mo., Day, Yr.)						For	Former Name (If applicable)					
Name	(Last)	1	(First)		(Mic	Work Telephone –		_				
Address	(Street)				(Apt	Home Teleph		me Telephone -	_			
	(City)			(Zip Code)			Em	Email Address				
*For the purposes of the nev	v Hope and Life	etime Learning tax credits	s, federal law (secti	ion 6109 of th	e Internal R	evenue Code) req	uires the Unive	ersity to obtain your	Social Sec	urity number.		
Are you currently or status for low schola		Yes No	UW Stude	nt # (Plea	se leave	blank if you d	on't have a	a UW # or if yo	u don't k	now it.)		
Are you a currently enrolled high school student?												
COURSES REQUE		n your computer please ne form will automatica			including t	the course fees (1	he Fees field	is immediately bel	ow, far rig	ht).		
(Office Use) Reg Number	SLN	Dept. Abbreviation	Course Number	Course Section	Number of Credits	Course Name		F	Fees			
							т	ECHNOLOGY F	EE			
Grading Option: Sa	atisfactory/No	ot Satisfactory	Audit	Standard	Grading (A	4–F)						
I accept the terms of			ility Agreement	-				Late F	ee			
www.pce.uw.edu/fina	ancial-respor	nsibility-agreement.					_	Registration F	ee	55.00		
Signature <b>X</b>				_ Date				Total Fe	es			
METHOD OF PAYN	1ENT					PAYMENT	INSTRIIC	PIONS				
		e drawn on a II S s	avings or check	ing accoun				(ACH) or credit/o	debit car	<b>d,</b> email your		
Electronic check (ACH). Must be drawn on a U.S. savings or checking account.  Credit or debit card. There's a nonrefundable 2.75% service fee when paying					completed registration form to <a href="mailto:c2reg@uw.edu">c2reg@uw.edu</a> . Once we process the form, you'll be emailed an invoice with a link to a secure payment site.							
						To pay by <b>bank check, money order</b> or <b>third-party payment</b> , send your completed registration form and payment to the address below.						
Third-party payment. Purchase order or letter of authorization to bill must accompany registration form.					UW Continuum College Registration Services P.O. Box 45010 Seattle, WA 98145-0010							
OFFICE USE ONL	Y											
ID Number		yment No.	Entered By		F/C/Mail	Date						