

## **GRADUATE REGISTRATION FORM SUMMER SESSIONS I, II and III**

Name:				DATE	
(Title)	(Last)	(First)	(Middle)		
Converse ID# o	r SS#:				
Summer Session 1a Course Number	Title				Credits
(alternate course)					
Summer Session 1b ( Course Number	<b>(online</b> ) Title				Credits
(alternate course)					
Summer Session 2 Course Number	Title				Credits
		<i>.</i>			
(alternate course)	(Maximum course load o	f two courses is <b>NEV</b>	(ER waived)		
Summer Session 3					]
Course Number	Title				Credits
(alternate course)					

If, for ANY REASON, you decide not to take the class(es), you MUST complete a Drop/Add form. This includes registration by mail as well as on-site registration. The form is available in the Office of the Registrar.

NOTE: All Students are bound by the Honor Code and regulations of Converse College.

\*\* Tuition and fees are due prior to the start of classes. <u>Tuition due dates are listed on the academic calendar.</u> Payments may be made through the my.converse.edu portal under the Student Billing section.\*\*

I understand that I assume financial responsibility for all tuition, fees and other charges incurred while attending Converse College. I also understand that my responsibility will continue until all such charges are paid in full. Any past due balances will incur late fees and finance charges at a rate of 18% annum until the past due balance is paid in full. Students may not register for future classes or receive a transcript until their balance is paid in full. Uncollectible accounts will be turned over to a collection agency. In the event of collection, with or without suit, the undersigned agrees to pay all cost of collection up to 40% and attorney fees and court fees.

Business	Office	use	only:

Amount paid:	
Amount paid.	

Approved	by:
----------	-----

Date:

STUDENT SIGNATURE



## **GRADUATE REGISTRATION FORM** SUMMER SESSIONS I, II and III

Name:		DA	TE		
(Title) (Last)	(First)	(Middle)			
Converse ID# or SS#:		( <u>Must</u> enter one of the options)			
Address:(Street/PO Box) (C					
(Street/PO Box) (C	City)	(Sta	te) (Zip)		
Phone:(Area Code & Number)		Date of I	Birth:		
E-mail:					
Classification (check one):	]	Ethnic Informat	tion (not requi	red):	
Special Status	-				
(Non-degree)	]	Non-resident Ali	en		
Student must complete Application Special Status form	<i>for</i> ]	Black, Non-Hisp	anic		
Graduate Music	1	American/Alaska	n Indian		
Graduate Education	1	Asian Pacific			
	]	Hispanic			
	,	White, Non-Hispanic			
If previously enrolled at Converse Colle	ge, comple	ete the following	:		
Last Enrolled: N	Name when enrolled:				
Is the above address the same as when la	ast enrolle	d?	Yes	No	
I wish to participate in the payment plan	1:		Yes	No	
I have approved financial aid.			Yes	No	