REGISTRATION WORKSHEET

TERM:  ☐ FALL ☐ JANUARY ☐ SPRING  YEAR: _______

DATE: __________________________

Name: ____________________________ Converse ID #: __________________________
(Last) (First) (Middle) (May use SS# in lieu of ID# - must enter one)

☐ Please check here if new address

E-mail: ____________________________

Home Phone: (_____)

Address: ____________________________Alternate Phone: (_____)

City __________________ State ______ Zip

UNDERGRADUATE: TRADITIONAL ☐ CONVERSE II ☐ VISITING STUDENT ☐
FRESHMAN ☐ SOPHOMORE ☐ JUNIOR ☐ SENIOR ☐ NON-DEGREE ☐ SECOND DEGREE ☐

GRADUATE: MED ☐ MAT ☐ EDS ☐ MFA ☐ MLA ☐ MMFT ☐ MM ☐ SPECIAL STATUS ☐

<table>
<thead>
<tr>
<th>SUBJECT &amp; COURSE #</th>
<th>SECTION</th>
<th>TITLE</th>
<th>CREDITS</th>
<th>DAY</th>
<th>TIME</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: (EDU101)</td>
<td>(01)</td>
<td>Name of Course</td>
<td>0</td>
<td>MWF</td>
<td>6 – 8:30pm</td>
<td></td>
</tr>
</tbody>
</table>

ALTERNATE

ALTERNATE

TOTAL CREDIT HOURS ________

YOU MUST FOLLOW PROPER DROP/ADD PROCEDURES IF YOU DROP OR ADD CLASS(ES).

Tuition and fees are due prior to the start of classes. Tuition due dates are listed on the academic calendar.
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.

*All students are bound by the Converse Honor Code.

ADVISOR SIGNATURE (Undergraduates only)

STUDENT SIGNATURE

Overload Approval Advisor Signature/Initials

Business Office Use Only:

Amount: __________
Date: __________
Approved by: __________

Rev. 6/14/17