



# IN-PERSON REGISTRATION FORM

RECEIVED

P \_\_\_\_\_

### PRIOR EDUCATION INFORMATION

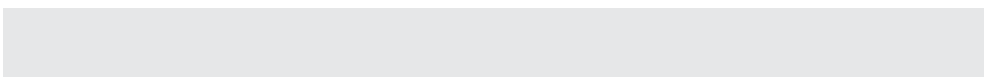
Did you graduate from high school?

Yes  No  If no, please provide details: \_\_\_\_\_

What is your current address? \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

**COURSE INFORMATION** Complete all information requested below. Refer to the class schedule on UAOnline for course information.

--	--	--



# <sup>1</sup> RESIDENT AND NON-RESIDENT TUITION

7

k u  
y"