

Semester: \_\_\_\_\_ Year: \_\_\_\_\_ Advisor \_\_\_\_\_

**Please check one:**  Undergraduate  Adult Undergraduate  Graduate  Visiting

MALE  FEMALE **ENROLLMENT STATUS** (check one):  Matriculating  Non-Matriculating  Auditor  Pass/Fail

STUDENT ID# \_\_\_\_\_ LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE OR MAIDEN NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

ADMITTING PROGRAM/MAJOR \_\_\_\_\_ SPECIALTY TRACK, IF ANY \_\_\_\_\_

Course #	Section	Course Title	Credits	Audit	Pass/Fail	Instructor's Approval

**Students in Graduate Studies:**

CHECK ALL THAT APPLY:  New Student  Caldwell Alumni  Law Enforcement Employee  Caldwell University Employee  Caldwell University Spouse/Dependent  Senior Citizen Auditor  Senior Citizen (taking course for credit)  High School/Dual Credit

**Waiver for Prerequisite:**

Course # to be registered in \_\_\_\_\_

Prerequisite Course(s) which will be waived \_\_\_\_\_

Approval Signature-Department Chair of the Course \_\_\_\_\_

I understand that enrollment in classes at Caldwell University constitutes a contractual financial obligation to pay tuition and fees. I further understand my financial obligations are due by the set due date each semester.

It is my responsibility to know the University's drop and withdrawal policy including the deadlines. It is my responsibility to drop or withdraw myself from classes. **My failure to drop or withdraw in a timely manner does not relieve me from my financial responsibility to the University for tuition and fees and any other costs.**

**I understand that nonattendance of classes does not classify as an official withdrawal, and does not relieve me of my financial obligation or entitle me to a refund.**

I understand that enrollment will **not** be canceled for failure to pay my semester bill, but that I **will** incur late payment fees if not paid by the set due date each semester.

I understand that if I leave the University with an unpaid balance and do not make satisfactory payment arrangements, my account will be placed with an external collection agency, and I will be assessed collection costs of 33% of the original debt in addition to the balance owed.

\_\_\_\_\_

**STUDENT SIGNATURE/DATE**

\_\_\_\_\_

**ADVISOR SIGNATURE/DATE**