



Master of Arts in Liberal Studies Registration Form

Name: _____
(Last) (First - Legal) (Middle Name) (Nickname)

Instructions: Current SNC Students should indicate their SNC I.D. below, update your address if necessary, and complete the course section.

Current SNC Students - Indicate SNC I.D. Number: 0 0 0

Address Information

(Street) (City) (St) (Zip)

Phone Number: (____) _____ - _____ E-Mail: _____

Previous SNC Enrollment: Have you ever taken a course through SNC before? No Yes
If, yes, when were you last enrolled? _____

If this is the first time you are enrolling in a graduate level course, indicate your previous college and degree.
Previous Degree _____ Date Earned _____ Institution _____

 - -
Social Security Number

Date of Birth: - -
(Month) (Day) (Year)

The following information is used by SNC for federal reporting purposes and is required for registration.

Indicate Sex: Male Female

Indicate Ethnicity: Not Hispanic or Latino Hispanic or Latino

Indicate Race(s): American Indian Asian Black or African American
(check one or multiple boxes) Hawaiian/Pacific Islander White

Course Enrollment Information: To register as an auditor (No Credit) indicate 0 credits and check Audit line.

CRN #	Course #	Course Title	Credits	Audit	Tuition*	Term

*Additional \$25 Technology Fee per course will automatically be charged.

I hereby acknowledge financial responsibility for the tuition and fees resulting from this registration

Students Signature

Date

Please return this form to:
MLS Program Coordinator, St. Norbert College, 100 Grant Street, De Pere, WI 54115 OR Fax: (920) 403-4086.