

BIOGRAPHICAL INFORMATION

Name _____ SSN _____
Last First MI

Home Address _____

Street _____ City _____ State _____ ZIP _____

Phone _____ Email _____
Personal email

Date of Birth _____ Gender: ☐ Female ☐ Male

Citizenship _____ Religious Affiliation _____

Ethnic Background: Hispanic or Latino v ☐ Yes ☐ No

Check one or more:

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Two or more races

Marital Status: ☐ Single ☐ Married ☐ Separated ☐ Widowed ☐ Divorced

STUDENT INFORMATION

Teacher Certification

[☐ Elem ☐ Middle ☐ Music ☐ Special Ed. ☐ Sec: Subject _____]

Graduate of ? _____
 (copy of transcript or diploma required from your home institution)

Transient/Visiting Student from _____
 (completed Transient Student Certificate required with registration form)

What is your major? _____

GENEVA REGISTRATION SEMESTER _____ YEAR _____					
Course Num (e.g. EDU 321 01)	Course Title (e.g. Teaching of Reading PK-4)	Credits	Begin Date	End Date	Instructor's Signature (required for closed class or special permission class)

PAYMENT AGREEMENT

In applying for registration at Geneva College, I agree to pay all charges incurred in accordance with College policy.

Student Signature _____ Date _____