



# SPECIAL ENROLLMENT FORM (To Be Used For Credit Only)

1. ESU ID # \_\_\_\_\_ SSN # \_\_\_\_\_ Semester/Year \_\_\_\_\_

2. Legal Name \_\_\_\_\_  
PRINT Last First Middle Maiden

3. Address \_\_\_\_\_ No. and Street, Apt. #, RR  
4. Phone (H) (\_\_\_\_\_) \_\_\_\_\_  
(W) (\_\_\_\_\_) \_\_\_\_\_

5. City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

6. Email Address: \_\_\_\_\_

7. Birth Date \_\_\_\_\_ 8. U.S Citizen  Yes  No

9. Lived in Kansas the last twelve months?  Yes  No 10. State or Country of Residency \_\_\_\_\_

11. High School Name \_\_\_\_\_ Graduation Year \_\_\_\_\_

12. Are you planning to obtain a degree at ESU? \_\_\_\_\_

13. College(s) from which you have earned a degree:  
Degree Received Graduation Date  
B/S \_\_\_\_\_ B/A \_\_\_\_\_  
M/S \_\_\_\_\_ M/A \_\_\_\_\_

14. Have you previously earned credit from ESU (EKSC or KSTC)  Yes  No

Indicate the courses in which you plan to enroll for the upcoming semester:

CRN	Subj.	Course No.	Sect.	No. of Cr. Hrs	Credit Level UG or GR	Course Title	Tuition/Fees (If known)

15. Have you completed the prerequisite(s) for the above course(s)?  Yes  No  
To verify the prerequisites needed for enrollment, view our Course Catalog at <http://www.emporia.edu/regist/catalog/>

16. Are you auditing any of the courses?  Yes List \_\_\_\_\_  No

The statement below MUST be signed in order to process this for credit enrollment.

- I certify that the information about my academic status is correct, and I understand that acceptance of my enrollment in this course does not constitute admission to a degree program at this institution.
- I understand a one-time \$10 application fee is assessed to new non-degree students, and that I will be billed for tuition and fees applicable to the credit hours enrolled.
- I understand that I may enroll in a maximum of 9 approved credit hours per semester.
- I promise and agree to pay Emporia State University the amounts due and all administrative fees, late payment fees, costs, and related expenses in collecting this debt, as allowed by law. (Note: A notification of your billing statement will be sent to you via your Buzz-In e-mail account with instructions about online payment options. If you opt to pay by credit card a 2.75% convenience fee will be added.)
- I understand that I must withdraw by calling Registration (620-341-5211), to receive a "W" in the course(s) rather than a letter grade on my ESU transcript.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

16. Questions regarding gender and race are optional, but are important in order to ensure equal educational opportunities.

GENDER  Male  Female  
RACIAL/ETHNIC  White  Black or African Am  Hispanic  2 or more races  
 Asian  Am Indian/Alaskan Native  Nonresident Alien List: \_\_\_\_\_

Submit to: Registration Office Campus Box 4026, 1 Kellogg Circle, Emporia, KS 66801, [reguser@emporia.edu](mailto:reguser@emporia.edu)