



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