## University of Minnesota

## REGISTRATION REQUEST FOR GRADUATE CREDIT

Non-degree students

**DIRECTIONS**—Use this form if you are a non-degree student who is not actively enrolled in a University degree program; needs coursework to appear on a graduate level transcript; and are willing to pay the graduate tuition rate on all courses (both graduate and undergraduate) you take for the term.

You must complete all ields with an asterisk (\*) in PART 1 for identification and academic records purposes. Data privacy information is available at onestop.umn.edu/grades and transcripts/student records privacy.html.

**Before you cancel classes,** check the refund schedule at onestop.umn.edu/calendars/cancel\_add\_refund\_deadlines/. Unless you cancel during the 100 percent refund period, you will be required to pay a percentage of your tuition and fees.

As a non-degree student, you are required to pay your student account balance in full by the first billing due date or your enrollment may be canceled or charged a \$35 rebilling fee. By registering for classes you enter into a legally-binding contract to pay all tuition and fees, including any non-refundable fees. You will not receive a paper bill. An email notice will be sent to your University-assigned email account when your bill statement is online. Billing due dates are available at onestop.umn.edu/finances/pay/where\_when\_how/.

## REGISTRATION REQUEST FOR GRADUATE CREDIT

Non-degree students CARLA Summer Institute participants: Please email form to Karin Larson at larso205@umn.edu.

Return form:

By mail to:

Office of the Registrar University of Minnesota, Twin Cities 160 Williamson Hall 231 Pillsbury Dr. SE Minneapolis, MN 55455-0252

On campus to:

160 Williamson Hall By fax to: 612-625-4351

By email to: otr@umn.edu

Questions?

Phone: 612-624-1111

TTY (hearing-impaired): 612-626-0701

Email: otr@umn.edu Web: onestop.umn.edu

Please print legibly. The required signatures in PART 3 and your own in PART 4 on page 2 must be in black or blue ink.

PART 1. Student background												
University ID If you have one.	Last four digits of SSN (option	al) *Name (last, firs	t, middle initial)	Previous name (if applicable)								
	XXX - XX -											
*Birthdate (mm/dd/yyyy)	*Email address (list your Univ	ersity email address if	*Phone (include area code)									
	active)											
*Current mailing address (street, apartment or P.O. box number, city, state, ZIP code, country)												
*Term Year												
☐ fall semester ☐ spring semester ☐ May/summer session					20 24							
		2024										
PART 2. Enrollment												
REGISTRATION—Register for classes by completing the information requested below. You may check class availability												
online at z.umn.edu/publicclasssearch.  You must choose either A/F to get a grade or S/N for Satisfactory/Not Satisfactory												
Course subject, number, section (Arts 5001-001)		5-digit class number	Credits	Grade basis (A-F or S/N)	Permission number (if required)							
CL 5621: Cultu	CI 5621: Culture as the Core											
Cr 302 r. Cuitt	51 302 1. Culture as the Core		2									
	Check here to cancel all											
To cancel individual of	classes, give the informat	ion requested belo	w for each cl	ass.								
Course subject, num				mber, Course subject, number,								
section (Arts 5001-0	901) section (Arts 5001-00	1) section (Arts 50	01-001) sed	ction (Arts 5001	on (Arts 5001-001) section (Arts 5001-001)							
5-digit class numb	digit class number 5-digit class number		5-digit class number 5-		nber 5-digit class number							

—IMPORTANT: You must get signatures in PART 3 and add your signature to PART 4 on page 3—





PART 3. Departmental authorization											
This will be completed by staff at the University's College of Education and Human Development.											
	5-digit class number	Program (college) code (e.g., CLA=17)	Tuition code		Sub-plan (for special tuition rates)	Student group					
			□ 99 PRD [	06 DMS	BUSTAX LS HHHFELLOW	□cegr □HSCE [	SENIOR				
	Name of authorized si	ame of authorized signer (please print)		Phone							
Authorized signer signature (e-signatures will not be accepted)			Date								
						Ta					
	5-digit class number	Program (college) code (e.g., CLA=17)	Tuition code	TOE DMS	Sub-plan (for special tuition rates)    BUSTAX   LS   HHHFELLOW	Student group    CEGR					
	Name of outborized ai				LIBOSTAX LIES LITTITI ELLOW	LICEGR LINGCE	_JSENIOR				
Name of authorized signer (please print)				Phone							
Authorized signer signature (e-signatures will not be accepted)			Date								
	5-digit class number	Program (college) code (e.g., CLA=17)	Tuition code	06 DMS	Sub-plan (for special tuition rates)  BUSTAX LLS HHHFELLOW	Student group  CEGR HSCE SENIOR					
Name of authorized signer (please print)			Phone								
Authorized signer signature (e-signatures will not be accepted)				Date							
_	DADT 1 Corti	ification									
PART 4. Certification  I understand that if I choose to withdraw from course(s) after the withdrawal deadline has passed, I will receive a 'W' on my transcript and will still be responsible for any tuition costs. I understand I will receive no credit for courses for which I have selected an audit grading option. I also understand that if I choose to use these courses at another college or university, the credits will be subject to the transfer policies of that institution.											
9	Student signature (e-signatures will not be accepted)				Date						
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	Don't forget to sign and date this credit request form!										