

NORTH PARK UNIVERSITY

APPLICATION AND REGISTRATION FOR SUMMER COURSES

** If you are a current student at NPU, please do not use this form. You may register online or with an Add/Drop form as usual.*

Name: _____

Social Security Number: _____

Date of Birth: _____

Preferred Mailing Address: _____

City, State, Zip: _____

Cell Phone: _____ Home Phone: _____

E-mail: _____

Sex: ☐ Male ☐ Female

Ethnicity (optional): ☐ Hispanic ☐ Asian/Pacific Islander ☐ Caucasian
☐ African American, Non-Hispanic ☐ Native American or Alaskan Native

Are you seeking a degree from North Park University? ☐ Yes ☐ No

Have you ever attended North Park University before? ☐ Yes, my dates of attendance were _____
☐ No

Student Status (Misrepresentation will result in the voiding of all registration and credits earned at NPU)

☐ High School graduate only, name and location of high school _____

☐ Undergraduate Elsewhere, name and location of school _____

☐ Other (Explain) _____

Preferred Courses-Please submit a \$20 non-refundable tuition deposit for each course*

Department	Course Number	Section	Title	Credits	Instructor's Signature, if required

If you are registering for graduate courses or non-traditional undergraduate courses, you must obtain approval from the department. Department signature: _____

** Please note that if you choose a course that is closed (there are no spots left) or cancelled, you will not be registered for the course. If a course is closed, you may be allowed to register only with the professor's signature or other written permission. Additionally, if you have an outstanding balance from any previous enrollment at North Park University, you will not be allowed to enroll in any further courses until it is paid. You will be contacted by Student Administrative Services if there are any conflicts with your registration. In the event that you are unable to enroll in the courses due to a closed class, you will be refunded your tuition deposit.*

I hereby certify that the information provided on this form is true and correct. I understand that the cost of tuition and fees is my responsibility, as outlined in the North Park University Catalogue.

Signature _____ Date _____

Student Services Box 9 3225 W Foster Ave Chicago IL 60625 Fax: 773-634-4051 Phone: 773-244-5560 Email : records@northpark.edu

For Records Office Use Only

Date Received _____ Records Office Personnel _____

\$20 Non-refundable tuition deposit for each course paid _____