



SPECIAL STUDENT REGISTRATION FORM

Please complete ALL fields.

Evergreen ID# A _____ Chosen Name _____

Legal Name _____

Mailing Address _____ City _____ State _____ Zip _____

Phone (____) _____ Alt. # (____) _____ E-Mail _____

Social Security Number _____ Date of Birth _____ Sex: Male Female

Are you a U.S. Citizen? Yes No Nationality: _____ WA Resident: Yes No Resident Since (MM/YY): _____

Are you Hispanic in origin? Yes, I am Hispanic in Origin. (Select one or more): (H10) No, I am non-Hispanic in origin. (H20)
 Colombian (707) Dominican (710) Honduran (718) Nicaraguan (723) Puerto Rican (727) Uruguayan (734) Venezuelan (735)
 Costa Rican (708) Ecuatorian (Ecuadorian) (711) Mexican or Mexican-American (Chicano) (722) Panamanian (724) Salvadoran (712) Other Hispanic Origin (H10): _____
 Cuban (709) Guatemalan (716) Peruvian (726) Spanish (730)

How do you describe your race? (Select one or more):
American Indian (Select one or more):
 Chehalis (020) Hoh (052) Lummi (028) Port Gamble Klallam (025) Sauik-Suiattle (038) Spokane (160) Swinomish (047)
 Chinook (055) Jamestown (023) Makah (053) Puyallup (036) Shoalwater (492) Squaxin Island (043) Tulalip (048)
 Colville (159) Kalispel (156) Muckleshoot (034) Quileute (051) Skokomish (079) Steilacoom (044) Upper Skagit (039)
 Cowlitz (027) Kikillus (032) Nisqually (035) Quinault (050) Snohomish (041) Stillaguamish (045) Yakima (078)
 Duwamish (031) Lower Elwha (024) Nooksack (029) Samish (037) Snoqualmie (042) Suquamish (045)
 Other American Indian (R13): _____
Alaska Native (Select one or more):
 Alaska Aleut (Unangan) (941) Alaska Athabaskan (014) Alaska Eyak (943) Alaska Tlingit (017) Other Alaska Native (950): _____
 Alaska Alutiiq (942) Alaska Eskimo (Inupiaq or Yupik) (935) Alaska Haida (016) Alaska Tsimshian (018)
Asian (Select one or more):
 Asian Indian (600) Cambodian (Kampuchean) (604) Indonesian (610) Madagascar (639) Nepali (635) Taiwanese (606) Vietnamese (619)
 Bangladeshi (601) Chinese (605) Japanese (611) Malayan (614) Pakistani (616) Thai (618) Other Asian (R20): _____
 Bhutanese (602) Filipino (608) Korean (612) Maldivian (634) Singaporean (637) Sri Lankan (617)
 Burmese (603) Hmong (609) Laotian (613) Mongolian (624)
Black or African American (R30)
Native Hawaiian or Other Pacific Islander (Select one or more):
 Fijian (676) Marshall Islander (662) Papua New Guinean (678) Tahitian (656) Trukese (Chuukese) (674)
 Guamanian (660) Micronesian (669) Ponapean (Pohnpeian) (670) Tarawa Islander (672) Vanuatuan (New Hebrides Islander) (680)
 Kosraean (667) Native Hawaiian (653) Samoan (655) Tokelauan (659) Yapese (675)
 Mariana Islander (661) Palauan (663) Solomon Islander (679) Tongan (657) Other Pacific Islander (R40): _____
White (includes people of European, Middle Eastern, or North African descent) (R50)



**the evergreen
state college**

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Please complete ALL fields.

Have you previously attended classes at Evergreen? No Yes, last quarter attended: _____

Last School Attended _____
 Name of School _____ City/State _____

 Ending Period (MM/YY) _____ Diploma/Degree _____

FOR OFFICIAL USE ONLY			
<input type="checkbox"/> NonResident	<input type="checkbox"/> Resident	<input type="checkbox"/> UG	<input type="checkbox"/> GR
TOTAL CREDITS _____	Late fee? <input type="checkbox"/> NO	<input type="checkbox"/> YES \$50 \$100	
Student Accounts			
OK to reg? <input type="checkbox"/> YES <input type="checkbox"/> NO _____			
Financial Aid			
Eligibility Review <input type="checkbox"/> YES <input type="checkbox"/> NO _____			

Are you a military veteran? YES NO Are you eligible for federal dependent/veteran benefits? YES NO

ADD REGISTRATION

OFFERING TITLE	FACULTY SIGNATURE <small>IF REQUIRED OR ADDING AFTER THE QUARTER BEGINS</small>	CRN <small>Course Reference Number</small>	QUARTER <small>Fall, Winter, Spring, Summer</small>	NUMBER OF CREDITS

DROP REGISTRATION

OFFERING TITLE	CRN <small>Course Reference Number</small>	QUARTER <small>Fall, Winter, Spring, Summer</small>	NUMBER OF CREDITS

Emergency Contact _____ Phone (____) _____
 Name _____ Relationship _____
 Address _____ City _____ State _____ Zip _____

Evergreen will release directory information such as permanent and local address(es), telephone number, enrollment confirmation and degree if earned, to outside inquires upon request unless you indicate confidentiality. If you wish to keep your information confidential, please ask for the Request for Confidentiality of Directory Information form.

I understand and accept the registration and payment policies of The Evergreen State College.

Signature _____ Date _____

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INITIAL _____	DATE _____