

University of Rochester--Eastman School of Music--Registration Form--Page 1
Fall or Spring semester (circle one), Year _____

Social Security Number _____ Name _____ Today's Date _____
Birthdate (mm/dd/yy) _____ Sex: (m/f) _____

Citizenship Information

(required for government reporting)

1.) If you are not a US citizen:

- a.) County of Citizenship _____
- b.) Type of Visa _____
- c.) Permanent US Resident _____

2.) If you are a US citizen:

a.) What is your ethnic background? (check one)

- Asian, Indian, Pacific Islander
- American Indian, Native American
- African American
- Hispanic
- Caucasian
- Other _____

b.) State of Legal Residence when admitted to
the Eastman School: _____
If NY State, which county _____

Address Information

1.) during term

Street _____

City _____ State/Prov _____ Zip _____
Phone _____ Country _____

2.) not during term

Street _____

City _____ State/Prov _____ Zip _____
Phone _____ Country _____

3.) parent/gurdian

Street _____

City _____ State/Prov _____ Zip _____
Phone _____ Country _____

Emergency Contact

name: last _____ first _____
phone _____ relationship _____

Important: Please use registration form with your pre-printed when ever possible. Use this form only if you did not receive, or have misplaced the preprinted form.

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Name _____

Social Security Number _____

Educational History

Check all that apply

_____ first time at any college or university

_____ first time at UR but have attended other college or university

_____ have a bachelor's degree

_____ expect to receive Veteran's benefits this semester

Program Information

class _____

last date of attendance at UR _____

<u>college</u>	<u>time stat</u>	<u>degree</u>	<u>major-1</u>	<u>major-2</u>	<u>minor</u>	<u>official</u>	<u>instr-1</u>	<u>instr-2</u>
06	_____	_____	_____	_____	_____	Y	_____	_____

Course Requests

<i>crn</i>	<i>subject area</i>	<i>course number</i>	<i>audit (check)</i>	<i>credit hours</i>	<i>course title</i>	<i>instructor name</i>	<i>signature (if necessary)</i>
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

advisor's signature _____
(if necessary)