

Graduate Registration Form



SCHOOL OF CONTINUING STUDIES

Program _____
 Term _____
 Today's date _____

PERSONAL INFORMATION

Name: Last _____ First _____ Initial _____

SSN or Student ID number _____ Female Male

Home address: Street _____

City _____ State _____ Zip code _____

Home telephone () _____ E-mail _____

Employer _____ Work telephone () _____

Work address: Street _____

City _____ State _____ Zip code _____

May we include your home address and home telephone number on our Internet directory? Yes No

(If you do not answer this question, your information will be included)

COURSE REGISTRATION INFORMATION

CREDIT	DEPARTMENT	COURSE NUMBER	COURSE TITLE	DAY	SECTION

STATEMENT OF ACADEMIC INTEGRITY

Northwestern University students and faculty are committed to scholarly principles that respect and acknowledge individual achievement. Because of this, certain behaviors are viewed as unacceptable, including cheating, plagiarism, falsifying or fabricating information, and aiding or abetting academic dishonesty. Students who violate these principles are subject to penalties, including course failure and dismissal from Northwestern University.

You must sign this statement. The School of Continuing Studies will not accept any unsigned registrations.

I certify that to the best of my knowledge all statements by me are correct, complete, and my own. By registering at Northwestern University, I agree to abide by the standards of academic integrity expected of Northwestern University students as outlined at www.northwestern.edu/uacc/uniprin.html.

Signature _____ Date _____

REGISTRATION FORMS ARE ACCEPTED BY MAIL, FAX, OR IN PERSON

School of Continuing Studies	Tel 312-503-6950 (Chicago)	E-mail: scs@northwestern.edu
Northwestern University	Tel 847-491-5611 (Evanston)	www.scs.northwestern.edu
Wieboldt Hall, 6th Floor	Fax 312-503-4942	
339 East Chicago Avenue		
Chicago, IL 60611-3008		

School of Continuing Studies use only

Credit tuition Student identification Holds Registration information