



Summer School Application/Course Registration Form VAIS Emerging Leadership Institute 2009 – Part I

APPLICANT INFORMATION

*ID/SSN _____ - _____ - _____
SSN will be replaced by an ALTERNATE ID number and will not be used as your primary identification.

Registering for Summer 2009
TERM YEAR

OFFICE USE
Registration Approved by _____

*NAME _____
LAST NAME – COMMA – FIRST NAME- COMMA – MIDDLE NAME OR INITIAL

IF ENROLLED UNDER A DIFFERENT NAME _____

*ADDRESS <input type="checkbox"/> (PE PERMANENT)	<input type="checkbox"/> (EB EMPLOYER/BUSINESS)
STREET 1 _____	STREET 1 _____
STREET 2 _____	STREET 2 _____
CITY _____ STATE _____	CITY _____ STATE _____
ZIP CODE _____ PHONE _____	CITY _____ PHONE _____
EAMIL ADRESS _____	NAME OF SCHOOL/EMPLOYER _____

*PERMANENT RESIDENT OF: Virginia City _____ Virginia County _____ Other State or Country _____

*BIRTH DATE _____ SEX: MALE FEMALE US CITIZEN Yes No RELIGION _____

ETHNIC GROUP: NATIVE AMERICAN/ALASKAN NATIVE (1) ASIAN/PACIFIC ISLANDER (2) BLACK NON-HISPANIC (3) WHITE NON-HISPANIC (4) HISPANIC (5) OTHER (6) MULTI-CULTURAL (7) I DO NOT WISH TO ANSWER (8)

*HAVE YOU BEEN ACCEPTED INTO A UR DEGREE PROGRAM? YES NO
IF YES, WHAT DEGREE: BA BS JD MBA BAS MAJOR _____

SCHOOL: A&S (A) BUSINESS/UNDERGRAD (B) CONTINUING STUDIES (C) GRADUATE A&S (G) LEADERSHIP STUDIES (J) LAW (L) BUSINESS/GRAD (M) UNCLASSIFIED LIBERAL ARTS (U)

*WERE YOU DISMISSED FROM A COLLEGE OR UNIVERSITY WITHIN THE LAST YEAR? YES NO

*Have you ever been convicted of a crime other than a minor traffic violation: YES NO

If yes, please explain _____
As of July 1, 2006, Virginia law requires all public and private two-and-four-year institutions of higher education to electronically transmit information about applicants accepted for enrollment at each institution to the State Police for comparison to the Virginia Criminal Information Network and National Crime Information Center Convicted Sexual Offender Registry. If the University is notified that an admitted student has committed a sex offense, the admitted student is subject to the admission being revoked.

REGISTRATION/COURSE INFORMATION

COURSE REFERENCE NO.	SUBJECT	COURSE NUMBER	SECTION	COURSE TITLE	BEGIN DATE	CREDIT HOURS
30253	EDUC	598U	01	ST: Emerging Leadership Institute	July 20	3

PAYMENT INFORMATION: Non-refundable deposit of \$250 is due with your application by May 1, 2009. Final payment is due no later than June 15, 2009.

Please check your registration type:

- VAIS Member–Commuter (Room not needed) **\$1,510** Non-VAIS Member–Commuter (Room not needed)..... **\$1,910**
 VAIS Member–On Campus (Room needed) **\$1,650** Non-VAIS Member– On Campus (Room needed) **\$2,050**

CHECK attached for \$250 deposit. Checks should be made payable to the *University of Richmond*. If you need a receipt, check here.

OTHER INFORMATION

I will need refrigeration for medication.

Please list any dietary needs for meals: _____

I agree to abide by the regulations approved by the faculty and published in the current Bulletin of the University of Richmond.

*APPLICANT'S SIGNATURE DATE

* Required Field. Application will not be processed without this information.

Please return Form with your payment to: School of Continuing Studies, Summer School Office, University of Richmond, VA 23173
Once received and processed, we'll send you Part II of the Application.