



Outreach & Continuing Education

SELF-PACED INDEPENDENT LEARNING

Note: Enrollment dates determine quarter of registration for the transcript record:

- Fall Sept 1 – Nov 15 Spring Mar 1 – May 31
 Winter Nov 15 – Mar 1 Summer May 1 – Aug 15

Required Registration Information

Name: (Last) <i>please print</i> (First) (MI)		Previous name:	WWU Student #:
Mailing Address:		City:	State: Zip:
Day Phone:	Home Phone:	E-mail Address:	
<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: M/D/Y	Social Security (if no W#) optional	
Previous application or attendance at WWU? <input type="checkbox"/> No <input type="checkbox"/> Yes	Are you currently a Washington state resident? <input type="checkbox"/> No <input type="checkbox"/> Yes, *from _____ to _____ <input type="checkbox"/> current *You will be classified non-resident if you fail to provide dates	Please check one: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. Permanent Resident* <input type="checkbox"/> Not U.S. Citizen / Not U.S. Resident *If you checked U.S. Permanent Resident, list Resident Alien number or country and U.S. visa type, along with the date granted: _____ date granted _____	
► Do you currently receive, or anticipate receiving, any financial aid from WWU? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, then the course <i>must</i> be complete and graded by the end of the registered quarter as to assure your continued eligibility (SAP) for financial aid, or you may be at risk of having your financial aid suspended. EE may share information with financial aid staff.			

CRN <i>OFFICE USE ONLY</i>	COURSE & NUMBER	CREDITS	COURSE INSTRUCTOR	TUITION/FEES \$160/credit
Registration Fee + Legislative Action Fund Fee				\$26.00
TOTAL				
Unless a course is designated S/U grading only, all courses are graded on the A-F system. To change from A-F to Pass/Fail, you must contact the Independent Learning office (contact information below) to sign a grading change form. Pass/Fail cannot be chosen for required classes.				

Student Signature _____ Date _____

The information I have listed above is accurate to the best of my knowledge. I understand that by registering on this form, I am incurring a legal debt to Western Washington University and will not be released from that debt unless I follow required schedule change procedures and deadlines. It is my responsibility to obtain University policy information regarding registration and if appropriate policies and procedures for financial aid.

Should I decide to withdraw from this course, I must request a refund in writing to ilearn@wwu.edu within 30 days from form submission date.

► Mail Registration Form to: Outreach & Continuing Education 516 High St MS 9102 Bellingham WA 98225	FOR STAFF/OFFICIAL USE ONLY Matriculated Student: <input type="checkbox"/> Yes <input type="checkbox"/> No Previous Credits _____ Revised Credits _____ <input type="checkbox"/> Holds (SOAHOLD)
► E-Mail Registration Form (as PDF) to: ilearn@wwu.edu	<input type="checkbox"/> WWU ID <input type="checkbox"/> Registrar/Banner Input Complete <input type="checkbox"/> Confirmation Letter Registrar/Banner Input Complete: _____
<ul style="list-style-type: none"> • Tuition and fees will be posted to your student account and are due upon enrollment. Payment options will be sent to you in a confirmation email. • Accounts are subject to late fees and interest if left unpaid. • Students are responsible for being aware of the activity on their account and paying balances on time. 	