WRIGHT STATE UNIVERSITY

New Student Undergraduate Nondegree Application/ Registration Form

Office of the Registrar
3640 Colonel Glenn Hwy.
Dayton, OH 45435-0001
(937) 775-5588
FAX (937) 775-5597

For academic advising, call the University College, (937) 775-5750.

Return to the Office of the Registrar

A $10 application fee will be assessed with other fees.

_____ — _____ — _____
Social Security number

Indicate quarter you wish to register
☐ Fall ☐ Winter ☐ Spring ☐ Summer

You must be a degree student to qualify for federal student financial aid programs.

Last name | First name | Middle name | Maiden name

Street address

County: check or enter Ohio county
☐ Montgomery ☐ Greene
☐ Clark ☐ Miami
☐ Mercer ☐ _____

City | State/Zip

Home phone | Business phone

☐ Male ☐ Female ☐ Married ☐ Unmarried

Month/day/year of birth

(Wright State is required by the federal government to report this information however, reporting it on this form is strictly voluntary for students.)
Ethnicity: (choose one) ☐Hispanic/Latino ☐Non-Hispanic/Non-Latino
Race: (choose one or more) ☐American Indian/Alaskan Native ☐Asian ☐Black/African American ☐Native Hawaiian/Other Pacific Islander ☐White

Educational Information: Have you ever attended Wright State University? ☐ Yes ☐ No

High school attended | City/State | Year of graduation

Last college attended/College awarding degree | City/State | Degree awarded and year earned

☐ Yes ☐ No Was cumulative grade point average above 2.0 on a 4.0 point scale at your last college attended?
If not, you *must* contact the Office of Admission before you register.

Resident/Nonresident Information U.S. citizen? ☐ Yes ☐ No If not a citizen, what visa? _____

For the purpose of determining fees, students are classified as Ohio or non-Ohio residents. Please check one of the following which applies to your residency status.

☐ I do not reside in Ohio (nonresident).

☐ Yes I reside and am gainfully employed on a self-sustaining basis in Ohio and wish to pursue a part-time program.

☐ Yes I am on active duty in the United States military service and am stationed and residing in Ohio, or I am a dependent of such a person.

☐ Yes I have lived in Ohio for at least 12 consecutive months prior to this enrollment and am not receiving financial support from non-Ohio residents.

☐ Yes I am a dependent student with at least one parent or guardian residing in Ohio for at least 12 consecutive months prior to this enrollment.

☐ Yes I am a veteran of the U.S. Armed Forces who received an honorable or medical discharge and reside in Ohio, or I am a dependent of such a person.

Registration Agreement and Promise to Pay
By signing this agreement with Wright State University, I am requesting to be registered for classes and promise to assume financial responsibility for the payment of all my education-related charges and fees associated with my student account and to pay those charges when due. In the event my account becomes past due, I acknowledge that a registration and transcript hold will be placed on my account and my account may be reported to the credit bureau and referred to the State of Ohio Attorney General's Office for collection. I agree to pay all late fees, collection costs, and attorney fees related to the collection of my account.

Signature Date

☐ **Please indicate with an (x) if you do not want to be billed for student health insurance**

Enter Preferred Classes

Dept.	Course number	Section number	Credit Hours	In-State Per Credit Hour	Out-Of-State Per Credit Hour
				$	$
				Total Fees	$

UG=Undergraduate

Students are encouraged to select alternate classes. The alternate classes will be used only if the preferred classes are closed.
Enter Alternate Classes

Enter alternate classes with corresponding line number for preferred classes				
Alt. for Line no.	Dept.	Course number	Section number	Credits

Ohio law requires that non-resident fees be assessed to male Ohio students who are between the ages of 18 and 25 and have not registered with Selective Service.