



Division of Continuing Education & Professional Studies
University of Colorado at Boulder

178 UCB Boulder CO 80309 303-492-5148 Fax 303-492-5335

Credit Form

PROGRAM Boulder Evening ACCESS Summer Session Independent Learning Other _____ **TERM** Fall Spring Summer **YEAR** _____

FULL LEGAL NAME _____ **SEX** Male Female

CU STUDENT NO _____ **SOCIAL SECURITY NO** _____ **BIRTHDATE** _____ **AGE** _____
(If Applicable) (Required for TRA tax credits.) Month/Day/Year

MAILING ADDRESS* _____
No. and Street, Apt. No. City State Zip

HOME PHONE _____ **DAY PHONE** _____ **E-MAIL** _____
(Required for online courses.)

*If "permanent address" is different, mark this box () and see back of form. *Please fill in your selected courses on the back of this form.

CITIZENSHIP

- U.S. Citizen
- Non-U.S. Citizen - permanent status
Alien registration # _____
- Non-U.S. Citizen - temporary status
Country _____
Visa Type _____

RESIDENCY

- Colorado Other state (St. abbr. _____)

ETHNICITY

- African American or Black, not of Hispanic origin
- American Indian or Alaskan Native - Tribe _____
- American Indian or Alaskan Native, Non-Tribe member
- Asian or Pacific Islander
- Hispanic, Chicano, Mexican American, Latino
- Multiracial - define _____
- White, not of Hispanic origin
- I do not wish to provide this information

SELECTIVE SERVICE CERTIFICATION

- I certify that I am registered with the Selective Service.
- I am not required to register with the Selective Service because:
 - I am a female.
 - I am in the U.S. Armed Forces on active duty.
 - I have not yet reached my 18th birthday
 - I am age 26, or older, by the first day of class
 - I am a non-immigrant alien lawfully admitted in the U.S.

1. Have you served, or are you now serving, on active duty with the U.S. Armed Forces? Yes No From _____ To _____
 2. Do you have a high school diploma or a GED? No Yes High school name/City/State _____ Graduation Date _____
 3. Are you under 22 years old, not in high school, and not officially admitted or enrolled in a CU Boulder degree program? No Yes If yes, provide a copy of your high school transcript with ACT or SAT scores. (Fall and Spring semesters only)
 4. Have you ever enrolled for credit courses at any campus of the University of Colorado? No Yes If yes, most recent Term _____ Year ____ Campus _____
 5. Do you have a college degree? No Yes If yes, highest degree _____ and date awarded _____
 Do you plan to take: Undergraduate only Undergraduate and Graduate Graduate-only courses? **Colorado residents who have a bachelor's degree or higher from outside the CU system and are taking undergraduate courses through the ACCESS program or Summer Session must provide an official transcript showing degree received.**
 6. If you are a student at another university outside of the CU system please list the college or university you are currently attending _____
 7. Do you have a pending criminal charge OR have you ever been convicted of a crime, made a plea of guilty, accepted a deferred judgment, been adjudicated, or been required to register as a sex offender? (Misdemeanor traffic offenses are exempt.) No Yes If yes, you must attach the required "CE supplemental form."
 8. Have you ever been placed on probation, suspended, expelled, or been subject to official disciplinary action from any high school or postsecondary institution for any academic misconduct or behavioral misconduct? No Yes
- Failure to answer questions 7 and 8 will stop the processing of your application. If you answer yes to either question, you must include a written explanation.**

Complete this section if you have not attended any University of Colorado campus within the last 12 months, and are claiming in-state tuition classification. Students already classified as nonresidents must submit a separate "Petition for In-State Tuition."		
(NOTE: Failure to answer each question may result in your being classified as a nonresident.)	YOU	YOUR FAMILY (check one) <input type="checkbox"/> Parent <input type="checkbox"/> Court-Appointed Guardian
Dates of continuous physical presence in Colorado (mo./day/yr.)	____/____/____ to ____/____/____	____/____/____ to ____/____/____
Dates of employment in Colorado	____/____/____ to ____/____/____	____/____/____ to ____/____/____
List exact years personal, Colorado resident income taxes have been filed	_____	_____
Dates of extended absences (more than 2 months) from Colo. over the past two years	____/____/____ to ____/____/____	____/____/____ to ____/____/____
Dates of active military service, if applicable	____/____/____ to ____/____/____	____/____/____ to ____/____/____
If military, dates stationed in Colorado	____/____/____ to ____/____/____	____/____/____ to ____/____/____
Drivers License # _____ Dates of Colorado driver's license	____/____/____ to ____/____/____	____/____/____ to ____/____/____
License Plate # _____ List exact years of Colorado motor vehicle registration.	_____	_____
Dates of Colorado voter registration	____/____/____ to ____/____/____	____/____/____ to ____/____/____
Dates of ownership of a home (as a primary family residence) in Colorado	____/____/____ to ____/____/____	____/____/____ to ____/____/____

Admission to the University of Colorado as a Non-degree Student does not guarantee eligibility for regular degree status.

I hereby certify that to the best of my knowledge the information furnished on this application is true and complete. I understand that if found to be otherwise, it is sufficient cause for rejection or dismissal. I agree to observe all campus policies and regulations including the University [honor code](#).

Signature _____ Date _____

Credit Card: Visa _____ MC _____ Disc _____	Cardholder's Name _____
Credit Card # _____	Please Print
Exp date _____ / _____ Amount _____	Taken by _____ Date _____

*We will register you for these courses only during the scheduled registration periods. Registration is subject to course availability. You will receive a confirmation of enrollment after the registration process has been completed.

Dept. Abbr.	Course No.	Cr. Hrs.	Section No.	Title(s) of course(s) for which you plan to enroll

NOTE: Engineering students on academic suspension must obtain their Dean's approval to register for any Continuing Education class(es).

Dean's Signature
Date

*Permanent address if different than mailing address

Permanent Address _____	No. and Street _____	Apt. No. _____
_____	_____	_____
City	State	Zip