



Registration Form

College Credit Plus

Instructions

579 College Way
 Urbana, OH 43078
 937-772-9331
 ccplus@urbana.edu

Legal Name (First Name, Middle Name, Last Name)*		School Year* (list the current academic year)	Graduation Year*	Student ID Number (office use only)
1		2	3	4
Home Address*		City*	County*	State & Zip*
5		6	7	8
Date of Birth*	Home Phone*	Other/Cell Phone (optional)		High School*
9	10	11		12
Email Address*	Would you like to be contacted by the Urbana University Admissions Department? (Circle Yes or No)	College(s) You Are Considering (optional)		Possible Major(s) (optional)
13	14 Yes or No	15		16

Areas marked with an asterisk () in the section above need to be filled out completely **by the student**. In the section below, please mark when you are taking each class, either the **full year**, the **1st semester only**, or the **2nd semester only**.*

	Course	Course Name	Credit Hours	Section	Full Year	1 st Semester Only	2 nd Semester Only
1	17	18	19	20	21	22	23
2							
3							
4							
5							
6							
7							
8							
Total Hours			24				

If you have not yet applied and been accepted, please go online now to the College Credit Plus section of the Admissions area at www.urbana.edu/admissions to complete and submit your online application. If you have applied and been accepted in the past, please do NOT complete another online application.

It is understood that I/we are responsible for my account under any circumstances and denial of benefits, aid or reimbursement does not discharge this personal responsibility. I promise to pay all attorney's fees and other reasonable collection costs and charges necessary for the collection of any amount not paid when due. I further understand if a suit is filed to collect my account, it will be in Champaign County, Ohio, and hereby waive any claim, under State or Federal Law, against the University and/or its agents, that said county is improper for suit.

Each student has the obligation to become familiar with the contents of the University Catalog and Student Handbook and follow the policies and directives as stated.

Student Signature _____	25	Date _____	26
Parent/Guardian Signature _____	27	Date _____	28

Urbana University - College Credit Plus (2017-2018) Registration Form – Instruction Sheet

Please complete the attached Registration Form and return once signed by student and parent(s):

1. Legal Name – First name, middle name, last name.
2. School Year – current academic year 2017-2018.
3. Graduation Year – year that graduation is anticipated (4 digits).
4. Student Id Number – do **NOT** complete – for internal office use only.
5. Home Address – home address of record.
6. City – city of residence.
7. County – Ohio county of residence.
8. State & Zip – state and Zip Code of residence.
9. Date of Birth – in MM/DD/YYYY format (month/day/year).
10. Home phone number – primary phone number (may also use cell phone number as primary phone number).
11. Other/Cell phone number – if another/additional number is available.
12. High school – name of high school.
13. Email address – provide email address where CCP education-related communications can be sent.
14. Would you like to be contacted by the Urbana University Admissions Department? (Yes or No) – for further information about programs and scholarships at Urbana University as a full-time student.
15. College(s) you are considering – general information.
16. Possible Major(s) – general information.
17. Course – enter the course number. An example is: **ENG 102**.
18. Course Name – enter the course name. An example is: **Basics of Composition**.
19. Credit Hours – enter the number of credit hours for the course.
20. Section Number – enter the section number (provided by your guidance counselor).
21. Full Year – place an “**X**” in the box if this is a course you will take that runs the full year.
22. 1st Semester Only – place an “**X**” in the box if this course will be taken in the Fall semester.
23. 2nd Semester Only – place an “**X**” in the box if this course will be taken in the Spring semester.
24. Total Hours – enter the total number of hours to be taken for CCP credit.
25. Student Signature – student signs here.
26. Date – date student signs the document.
27. Parent/Guardian Signature – parent or guardian signs here.
28. Date – date of parent/guardian signature.

If you have any questions about course registrations, you may call the CCP office at 937-772-9331 or email the CCP office at ccplus@urbana.edu.

Thank you for your partnership in the College Credit Plus Program!



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Date of Birth*	Home Phone*	Other/Cell Phone (optional)	High School*
Email Address*	Would you like to be contacted by the Urbana University Admissions Department? (Circle Yes or No)	College(s) You Are Considering (optional)	Possible Major(s) (optional)
	Yes or No		

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