APPLICATION FOR 2015 NEWBERRY COLLEGE SUMMER SESSION

Newberry College students enrolled during the 2014-2015 Spring Semester do not need to complete this registration form.

1.	Name		SSN						
	Last First	Middle							
2.	Street Address	T	elephone						
3.	City	State	Zip						
4.	Parents'/Spouses' Name								
5.	Parents'/Spouses' Address								
6.	Birth Date	Birth Place	Race _						
7.	Have you previously attended Newb	erry College? YES	NO Sex						
	If yes, please give dates of last attendance:								
8.	Name and address of high school you attended and date of graduation:								
9.	. Have you attended a college other than Newberry? YES NO								
10.	0. If yes, list the name and address of the college(s), dates attended, and degrees, if any:								
11.	Will you be a residence hall student	YES NO EN	MAIL:						
12.	Please reserve the following course(s) for me:							
	DEPARTMENT	COURSE NUM	BER TIT	LE					
	MAY TERM								
	SUMMER I								
	SUMMER II	_							
		_							
13.	Date	_ Signed							
14.	NOTE: Students must have proof of	measles and rubella vacc	ination before registering	for classes.					
	This form must be completed as follows:								
	For Transient Students: Signature of the Academic Dean of college presently attending.								
	For High School Students: Signature of high school principal or counselor.								
	For Special Students such as Teach	ners, etc: Signature of in	nmediate supervisor.						
	The applicant whose name appears on Line 1 of this application is a student/teacher in good standing at								
	11	and has per	· · · · · · · · · · · · · · · · · · ·						
		Signed		C(5) 1131CU 400VC.					
		Name	Title						
	New students: Return to Director of								
	Transient Students, Special Students	•	•						