

James A. Woods, S.J., College of Advancing Studies Registration Form

BOSTON COLLEGE



Please use ball point pen—you are writing on two copies. Fill out the information below completely.

▶ Eagle ID Number _____ Fall Spring Home Phone _____

Legal Name _____ Cell Phone _____
Last First M.I. Maiden

Permanent Mailing Address _____ Work Phone _____
Street

_____ Date of Birth ____/____/____
City State Zip Month Day Year

E-mail _____ Gender: Male Female Marital Status: Single Married

▶ If you are a degree candidate in Advancing Studies, enter the code for your major _____

- | | |
|---------------------------------|------------------------|
| 35 Communication | 48 Information Systems |
| A-2 Corporate Systems | 25 Philosophy |
| A-6 Criminal and Social Justice | 26 Political Science |
| 06 Economics | 28 Psychology |
| 10 English | 31 Social Science |
| 96 Graduate Administrative | 32 Sociology |
| 17 History | 36 Theology |
| | 69 Undeclared |

▶ ENTER COURSES FOR CREDIT HERE (e.g., ENGL100101)

COURSE NUMBER	SECTION	CR	CHARGES
			\$

TOTAL TUITION (CREDIT) CHARGES \$ _____

▶ *This data is requested by the U.S. Government to demonstrate to the Department of Health, Education and Welfare, Boston College's compliance with the 1968 Civil Rights Act.*

Citizenship: U.S. Non-U.S. Type Visa _____

▶ ENTER COURSES FOR AUDIT (ONLY) HERE

COURSE NUMBER	SECTION	CR	CHARGES
			A \$
			A
			A

TOTAL AUDIT CHARGES \$ _____

▶ I understand that when I register for any class at Boston College or receive any service from Boston College I accept full responsibility to pay all tuition, fees and other associated costs assessed as a result of my registration and/or receipt of services. I further understand and agree that my registration and acceptance of these terms constitutes a promissory note agreement (i.e., a financial obligation in the form of an educational loan as defined by the U.S. Bankruptcy Code at 11 U.S.C. §523(a)(8)) in which Boston College is providing me educational services, deferring some or all of my payment obligation for those services, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of tuition and fees in accordance with the published tuition refund schedule at http://www.bc.edu/offices/stserv/financial/tuitionandfees/refund_schedule.html.

I have read the terms and conditions of the published tuition refund schedule and understand those terms are incorporated herein by reference. I further understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility as described above.

All requests for withdrawal from a course must be submitted in writing to the Woods College of Advancing Studies in St. Mary's Hall South. No course withdrawal or refund of tuition will be processed without written notification from the student.

• DO NOT WRITE BELOW THIS LINE •

Total Tuition Charge	
Total Audit Charge	
Registration Fee	
Other _____	
SUBTOTAL	
Tuition Remission _____	
SUBTOTAL	
LABORATORY FEE	
BALANCE DUE AT REGISTRATION	
PAYMENT RECEIVED	

PROCESSED BY: _____

DATE: _____

STUDENT SIGNATURE: _____