



Graduate Course Registration Form

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STUDENT ID NUMBER

MA-IS GDLD or GDHRM EdD MEd

GCID or GDID GCTBL or GDDDET Other:

General Student Information

Name: _____
Last First Middle

Former Name: _____
Last First Middle

Mailing Address: _____

Telephone Residence: (_____) _____
area code

Telephone Business: (_____) _____
area code

City/Town: _____

Province/State: _____ Postal/Zip Code: _____

Country: _____

Preferred Email: _____

Course Registration and Fees

Course name and number	Start Date (MMM/YY)	No. of credit	Course fees
Comments:	Total:		
<p>e-Transfer Payment by VISA, Mastercard or Debit/Credit. Student Financial Aid. Letter or Guarantee / Sponsorship Letter Payment enclosed, please make cheque or money order payable to Athabasca University.</p>			
Notes: Please contact the appropriate graduate program office for a direct link to provide credit card information. Full tuition fees are payable upon registration. Post dated cheques are not accepted. Ensure that you have the prerequisite course(s) if applicable (see prerequisites in the Athabasca University Graduate Calendar).			

The personal information collected on this form will be used to process your course registration request. This information is collected under the authority of section 4(c) of Alberta's Protection of Privacy Act (POPA). If you have any questions about the collection and use of this information, please contact the FHSS Graduate Office, Athabasca University, 1 University Drive, Athabasca, AB Canada T9S 3A3 Telephone: 1-800-788-9041.

Signature: _____ Date: _____

Please email completed forms to the appropriate FHSS Graduate Program Office