**PLEASE NOTE: If you have never been a graduate student at Youngstown State University, please return this form with a $45.00 non-refundable application fee. Nonresident students must pay an out of state tuition surcharge.**

Youngstown State University- College of Graduate Studies

Youngstown, Ohio 44555-3091

**WORKSHOP REGISTRATION FORM**

DEPARTMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WORKSHOP LOCATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COURSE TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ INSTRUCTOR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CRN #: \_\_\_\_\_\_\_\_\_ CATALOG #: \_\_\_\_\_\_\_\_\_\_\_\_\_ CR HOURS:\_\_\_\_\_\_ GRANT FUNDED (circle): YES NO

Banner ID or SS# Last Name First Name Middle Name Former Name

Mailing Address: Number and Street City State Zip Code Country

Permanent Address (if different): Number and Street City State Zip Code Country

How long have you resided at your permanent address? From (month and year) To (month and year) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have resided at your permanent address for less than one year, list your previous address for the past year:

Number and Street City State Zip Code Country

Email Address Home Phone Number Cell Phone Number

Date of Birth: (Month/Day/Year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender (circle one): Male Female

Are you a resident of Ohio? (circle one): Yes No Are you a U.S. citizen? (circle one): Yes No

If not, what is your country of citizenship? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ What type of visa do you hold? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your ethnicity? *Circle one or more of the following*:

 American Indian or Alaska Native Black or African American White

 Native Hawaiian or Other Pacific Islander Latino/Hispanic Asian

Do you have a disability that may require special services? (circle one): Yes No

Name of Undergraduate College City and State Year Graduated Degree

Have you ever attended YSU Graduate School? (circle one): Yes No If yes, date of last attendance?\_\_\_\_\_\_\_\_\_\_\_

**This course will be graded on a satisfactory/unsatisfactory (S/U) basis. Grade reports/transcripts will be available at the end of the semester in which the workshop is offered.**

I certify that I hold a Bachelor’s Degree from a regionally accredited institution and that the information given in this application is true. I understand that any misrepresentation of facts may result in dismissal or the non-awarding of course credit without recourse or refund. If I later decide to seek a degree, I will complete the admissions process required for the program to which I’m applying. I further understand that credit for this workshop may not apply towards a degree program.

I further agree to pay all tuition and fees associated with my registration. I understand that failure to withdraw in a timely manner does not release me from my financial obligation. All tuition statements are sent electronically and must be viewed online via the use of MyYSU portal. An email notification is sent to your YSU email account each time a bill is issued. Payments can be made online via the portal.

**Date** **SIGNATURE** **(after reading the above statement)**

**DO NOT WRITE BELOW THIS LINE (Office Use Only)**

\_\_\_\_\_Entry Term \_\_\_\_\_Admin Type

\_\_\_\_\_Degree Sought \_\_\_\_\_Student Type

\_\_\_\_\_Major \_\_\_\_\_Application Fee Paid