

Carnegie Mellon

Distance Education

Course Registration Form

Personal Data

Family name _____ Given and middle name _____

Date of Birth _____ Gender: Male Female

Ethnicity: African American, Black Hispanic, Latino
(Optional) Asian, Native Hawaiian or Pacific Islander White, Caucasian
 American Indian or Alaska Native Other: _____

Have you previously attended Carnegie Mellon? Yes No If yes, when? _____

Contact Data

Work or home address _____ "Ship to" address—we cannot ship to a post office box _____

Work Telephone _____ Fax _____ Valid Until _____ Telephone _____ Valid Until _____

Electronic mail address (Important) _____

Course Registration Information

Course Number _____ Course Name _____

Course Number _____ Course Name _____

Course Number _____ Course Name _____

Course Number _____ Course Name _____

Signature

Student signature _____ Date _____

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