



Registration Form-GRAD

Student Information:

AUA ID: _____

Full Name: _____
Last Name First Name Middle Name

Cell Phone: _____ Home Phone: _____

E-mail Address: _____

Degree Objective: _____ Semester/Term: Fall Spring Summer Year: _____

Last Name

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CRN	Subject Code	Course Number	Course Title	Credits	Section

First Name

AUA ID

Total number of credits registered for: _____

I _____ understand that:

All payments of AUA tuition and fees must be up to date and paid in full at the time of registration.

Registration will be denied if there is an outstanding balance on student accounts. Upon the start of the upcoming semester, registration will be voided if payments have not been made through the end of the previous semester.

Students who are not in Good Academic Standing (Cumulative GPA of 3.0 or more) after the current semester are subject to be put on Academic Probation and will lose all Financial Aid.

Signature

Date (mm/dd/yyyy)

For Office Use Only

Processed By: _____

Date: _____

Waitlist Time Recieved: _____

Office of the Registrar