

This form is for non-degree students registering for a day school (not Online and Continuing Education) course. Questions may be directed to the Student Service Center (SSC) at <https://www.umassd.edu/ssc/> under "Submit an inquiry" or call 508-999-8857.

**Biographical Information**

<b>First Name</b>	<b>Last Name</b>	<b>Middle Initial</b>	<b>Student ID Number</b>
		- -	/ /
<b>Previous Name (If Applicable)</b>		<b>Social Security Number (Required for New Student Only)</b>	<b>Date of Birth</b>
<b>Street Address</b>		<b>City/Town</b>	<b>State</b>
		-	-
<b>Phone Number</b>	<b>Alternate Phone Number</b>	<b>Email</b>	
<b>Emergency Contact Name</b>		<b>Relationship to You</b>	<b>Phone</b>
Male    Female			
<b>Sex (Circle One)</b>	<b>If you have previously attended UMass Dartmouth, when?</b>		

**Demographic Information**

Country of Citizenship <hr/> Are you a permanent resident of the USA? <input type="radio"/> Yes Alien Reg # A _____ <input type="radio"/> No	Please check off all that apply below: <ul style="list-style-type: none"> <li><input type="radio"/> American Indian or Alaska Native (Including all Original Peoples of the Americas)</li> <li><input type="radio"/> Asian from Indian subcontinent</li> <li><input type="radio"/> All other Asian Descent</li> <li><input type="radio"/> Cape Verdean</li> <li><input type="radio"/> African American</li> <li><input type="radio"/> Other Black (Including Africa and Carribbean)</li> <li><input type="radio"/> Native Hawaiian or Other Pacific Islander (Original Peoples)</li> <li><input type="radio"/> Portuguese</li> <li><input type="radio"/> White (Including Middle Eastern)</li> </ul>
Are you Hispanic or Latino? <input type="radio"/> Yes <input type="radio"/> No	
Are you a veteran? <input type="radio"/> Yes <input type="radio"/> No	

**Selected Courses**

Semester	Year	Course(s) : Course Subject/Number   Course Number   Course Section   Instructor Name
1)		_____
2)		_____
3)		_____

**Acknowledgment**

I certify that I meet all requirements for requested courses, including but not limited to prerequisites or degree status, and all information provided on this form is accurate and true to the best of my knowledge. I further certify that I have read the Financial Responsibility Agreement (FRA) in its entirety, available at <https://www.umassd.edu/bursar/financial-responsibility-agreement/> and agree to all terms.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

The university must identify the state of permanent residency for all students. Please consult the policy statement to understand how residency status is determined and the process for appeals at <https://www.umassd.edu/registrar/residency-reclassification/tuition-classification/>

**Residency Information**

Please mark the appropriate box and provide the information requested.

**Residents of Massachusetts Complete This Section:**

I have resided continuously in the Commonwealth of Massachusetts since \_\_\_/\_\_\_/\_\_\_ (month/day/year).

My permanent legal address is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Non-Residents of Massachusetts Complete This Section:**

I do not qualify for Massachusetts residency.

I am not a resident of Massachusetts, but I have a natural parent or legal guardian who provides my financial support and who has a legal Massachusetts residence. Therefore, I qualify for in-state residency.

The name and permanent address of this natural parent or legal guardian is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Acknowledgment**

I certify all information provided on this form is accurate and true to the best of my knowledge.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date