



# REGISTRATION FORM FOR INDIVIDUAL COURSES DUAL CREDIT

## STUDENT INFORMATION

Last Name:	First Name:	Middle Name:
Previous/Maiden Name(s) (if applicable):		
Current Mailing Address:		Date of Birth (mandatory):
City:	Province:	Postal Code:
Phone Number:	Email Address:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Citizenship:	Denomination:	Ethnicity:
High School Name:		Grade:
If you wish to declare you are an Aboriginal person, please specify: <input type="checkbox"/> Inuit <input type="checkbox"/> Metis <input type="checkbox"/> Status/First Nations <input type="checkbox"/> Non-Status/First Nations		
<input type="checkbox"/> This is my first course at Ambrose University		<b>*Alberta Student Number (ASN) (mandatory):</b>

## REGISTRATION INFORMATION

Semester:    Fall    Winter   Year: \_\_\_\_\_

Course ID and #:	Section	Course Name
1.		
2.		

## DECLARATION

I certify that the information provided is true and complete in all respects and understand that failure to provide complete and true information may result in penalties. I understand that I will be bound by the regulations of Ambrose University as listed in the Academic Calendar (see below).

<b>Student Signature:</b>	<b>Date:</b>
<b>Parent Signature:</b>	<b>Date:</b>

Please provide contact information for invoicing purposes:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

***Return this form to the Registrar's Office, Ambrose University***  
150 Ambrose Circle SW, Calgary, AB T3H 0L5 Fax: 403-571-2556 Email: registrar@ambrose.edu

## OFFICE USE

Entered in BlackBaud:	Copy Given to Finance:	Invoiced:
	Student Notified:	

- **Student Communication:** During the semester(s), the Ambrose school email account serves as the primary mode of official communication with students. It is the **student's responsibility** to be aware of email sent to their student email address.

**Please see the Academic Calendar for official policies: [www.ambrose.edu/registrar](http://www.ambrose.edu/registrar) Click on "Academic Calendar"**