

# COURSE REGISTRATION FORM

*University of Maine at Farmington*

**SUMMER 2008**

**A. INFORMATION ABOUT PAYMENT AND REGISTRATION PROCEDURES: PAYMENT IS DUE WHEN YOU REGISTER.** If an outside agency or school is to pay for the cost of your course, a purchase order **MUST** accompany your registration. **No registration will be accepted without accompanying payment.**

1) Your registration will be processed once a purchase order or other payment is received.

a.) If your **District or Agency is paying for this course**, please attach a purchase order to the completed registration form and mail (or fax to 778-7555) both to:

**UMF Office of Records and Registration, 224 Main Street, Farmington, ME 04938**

b.) If you are responsible for payment for this course yourself:

I. If you are **paying by personal check**, you **must** send a check for payment along with the course registration form to the **Office of Records and Registration** at the address above; or

II. If you are **paying by debit or credit card**, fax (778-7555) or mail the course registration to the **Office of Records and Registration** at the address above. You **must also** call Student Accounts at 778-7252 to give them your credit card information when you register for this course by fax or by mail and you are paying by debit or credit card.

2) **Costs per course:** In-State Tuition: **\$918\*** and Fees **\$114.**

*\* The University reserves the right, up to the date of final registration for the academic term, to make adjustments as may be deemed necessary by the Board of Trustees. Students will be billed additional charges if tuition and/or fees change after they have enrolled.*

**B. REGISTRATION INFORMATION:**

1) **PRINT NAME:** \_\_\_\_\_  
Last First Middle

2) Please indicate any other name(s) under which you may have previously registered: \_\_\_\_\_

3) **SOCIAL SECURITY NO.:** \_\_\_\_\_ 4) **DATE OF BIRTH:** \_\_\_\_\_

5) **MAILING ADDRESS:** \_\_\_\_\_  
Address City/Town State Zip Code

6) **HOME PHONE:** \_\_\_\_\_ 7) **BUSINESS PHONE:** \_\_\_\_\_

8) **E-MAIL ADDRESS:** \_\_\_\_\_

9) **SCHOOL DISTRICT/UNION:** \_\_\_\_\_ 10) **SCHOOL** \_\_\_\_\_

11) **POSITION TITLE:** \_\_\_\_\_ 12) **GRADE(S) TAUGHT:** \_\_\_\_\_

13) **SUBJECT(S) TAUGHT:** \_\_\_\_\_

**CHECK IF YOU DO NOT WANT THIS INFORMATION RELEASED** (If this box is checked, all further transactions regarding this course must be conducted in person or in writing.)

CRN	Check Appropriate Box(es)	COURSE #	COURSE TITLE	COST
	<input type="checkbox"/>	EDU 566	Effective Uses of Technology .....	<b>\$918.00</b>
<b>FEES</b>				
A. Outreach Fee (\$50 per course) .....				<b>\$50.00</b>
B. Unified Fee (\$64 up to 6.5 credits; \$127.50 for 7-11.5 credits; \$249.50 over 11.5 credits) .....				<b>\$64.00</b>
<b>TOTAL</b>				<b>\$1,032.00</b>

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_