

Non-Degree Student Registration

Quarter of Registrations	: (circle one)	Summer	Fall	Winter	Spring		Year:	
Legal Name:								
Street Address:								
City:			State:			Zip:		
Phone:			E-mail:					
Social Security		Country of		Country of				
Number:		Citizenship:		Residence:				
Date of Birth:			Gender:	M	F	(circle one)	2)	
Ethnic Origin (optional): A	merican Indian	ı/Alaskan Na	ative Hi	ispanic A	Asian Amer	rican Pac	cific Islander	
	White	/Caucasian	Black/A	frican Amer	rican			
Have you previously attended Bastyr University?	□ Yes	□ No		ease list any r names:				
Do you intend to apply for	admission to B	astvr Univer	rsitv?	□ Yes	□ No	Program:		
If you are considerin		•	•			_	t vou contact an	
Admissions Advis		-	-		-		-	
Fee Schedule: Academic credits 1 - 11 \$655.00 Academic credits 12 - 16 \$7,760.0 Academic credits 17 plus \$310.00 Audit Fee \$270.00		00 flat rate /credit		Should you choose to withdraw or not attend, you are subject to the standard refund schedule and add/drop fee as published in the Bastyr University catalog (http://bastyr.edu/) or \$100 of your tuition deposit is non-refundable, whichever is greater.				
Audit fee off site	\$375.00/	\$375.00/credit \$10			50% of tuition is due at time of registration.			
Add/drop fee	\$10							
Please list the class(es)	you wish to ta	ake (1/2 of y	our total	tuition mu	ıst accom	pany this	request):	
Course Number:		se Title:		1	ter as:		ing Day & Time:	
				□ Credit	□ Audit			
				□ Credit	□ Audit			
				□ Credit	□ Audit			
				□ Credit	□ Audit			
Return to the address be the above, the standard	_	-				-		
is gre	eater. The tui	tion balanc	e is due c	on/before t	he first da	ay of class		
I understand that I am s catalog. I am aware of t meet those prerequisites	the prerequisi	tes for the c	course(s) j	for which I	- I am regis	stering, and	= = = = = = = = = = = = = = = = = = = =	
Signature of Student				Date				
Deposit	Check		Registration				D.	
Amount:	Number:	Number: completed by:					Date:	