

SUNY Morrisville
Lifelong Learning (Non-Matriculated Student) Registration Form

Return completed form to the SUNY Morrisville Registrar's Office by email at registrar@morrisville.edu, by mail at P.O. Box 901 Morrisville, NY 13408, or in-person at the Registrar's Office – Whipple Administration Building, 3rd Floor. Office hours are Monday through Friday, 8:00am-4:30pm.

PLEASE PRINT

Name: _____
Last *First* *Middle* Social Security Number Date of Birth

Street Address: _____ City: _____ County: _____

State: _____ Zip: _____ Phone: _____ E-mail: _____

Legal Sex: Female Male Other Gender Identity: Female Male Other (Non-Binary/Intersex/Genderfluid/Genderqueer)

Ethnicity: White Black Hispanic Asian/Pacific Islander American Indian/Alaskan Native Non-Resident Alien Other

Name, address, and phone of parent/legal guardian (if under the age of 18): _____

Name and address of high school attended: _____

Year graduated: _____ Or GED received: _____

Prior College(s) attended: _____

Degree(s) earned and date(s): _____

Do you plan to earn a degree from Morrisville? Yes No Major of Interest: _____

Semester/Year of registration request (ex. Fall 2024): _____

<u>Subject</u>	<u>Number</u>	<u>Section</u>	<u>CRN</u>	<u>Title</u>	<u>Credits</u>
<i>Ex. COMP</i>	<i>101</i>	<i>01</i>	<i>12345</i>	<i>Composition & Research</i>	<i>3</i>

I understand that all academic and financial responsibilities must be met by this institution's published deadline dates for the semester. I also understand that my signature is binding and that I must make any changes using the proper procedures and forms of this institution. Failure to do so may result in academic and/or financial liability and/or penalty. **My signature indicates that I have read, understand and agree to abide by the above terms.**

Signature Date

Prior to arrival to campus, ALL students registered for six (6) credit hours or more MUST submit the following information:

MEASLES, MUMPS, RUBELLA (MMR) – New York State Public Health Law 2165 requires:

Any student born after January 1, 1957 must provide proof of immunity to measles, mumps, and rubella. This requirement may be met by the following: proof of disease, immune titers, or two (2) measles, one (1) mumps, and one (1) rubella vaccine given after the student's first birthday.

MENINGITIS: IMMUNIZATIONS DATE OR DECLINATION FORM – New York State Public Health Law 2167 requires:

A record of at least one (1) dose of Meningococcal ACWY vaccine within the past 5 years or a complete two (2)-dose series of Meningococcal B OR

An acknowledgement of meningococcal disease risks and refusal of meningococcal vaccination response form signed by the student or the student's parent or guardian (if under the age of 18).

Non-Compliance will result in dismissal from SUNY Morrisville