

GRADUATE PROGRAMS: Course Registration Form

- POST MASTERS DIPLOMA: NP
- MASTER OF NURSING: NP
- MASTER OF NURSING: GENERALIST
- MASTER OF HEALTH STUDIES
- NON-PROGRAM 1st Course 2nd Course

All new non-program students must complete an online Non-Program Application.

- BACHELOR OF NURSING
Prerequisite completed Yes No

--	--	--	--	--	--	--	--

AU STUDENT ID NUMBER

--

SPONSORING ID NUMBER

--

REFERENCE NUMBER

Please print clearly and complete all sections.

General Information

 Name: _____
Last First Middle

 Telephone Residence: () _____
area code

 Former Name: _____
Last First Middle

 Telephone Business: () _____
area code

Mailing Address: _____

Fax Residence: _____

City/Town: _____

Fax Business: _____

Province/State: _____ Postal/Zip Code: _____

E-mail Business: _____

Country: _____

E-mail Residence: _____

Course Registration and Fees Fall Session Winter Session Spring Session

Course Name and Number	Course Fees	For Office Use Only
		Approved Yes No
		Approved Yes No
Comments	Total Fees	
Prerequisite (if applicable please complete a Prerequisite Declaration Form) <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	<input type="checkbox"/> Payment enclosed. Please make cheque or money order payable to Athabasca University. <input type="checkbox"/> Payment by VISA, Mastercard, or American Express. Complete the VISA/Mastercard/American Express Charge Form and submit with this form.	
Notes: Ensure that you have the necessary academic preparation for the course(s) requested (see prerequisites in the Athabasca University Graduate Calendar).	N.B. All fees payable upon application. Post-dated cheques are not accepted.	

For information on fees, see the current Athabasca University Calendar.

The personal information collected on this form and any other personal information collected and maintained as part of a student's record will be used for the purpose of registration. Certain personal information will also be disclosed to Statistics Canada, as required by the Statistics Act (Canada), and Alberta Learning to meet reporting requirements, and by agreement, to the Students' Union and the Alumni Association for the purposes of membership, fee collection and contacting students. This information is collected under the authority of the Alberta Universities Act that mandates the programs and services offered by Athabasca University and section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act. It will be protected by the provisions of the Alberta Freedom of Information and Protection of Privacy Act. If you have any question about the collection and use of this information, contact the Dean, Faculty of Health Disciplines, Athabasca University, 1 University Drive, Athabasca AB T9S 3A3, telephone 780-675-6818

Mail or fax the completed form and fees to: Graduate Programs
 Centre for Nursing and Health Studies
 Athabasca University Phone: 1-800-788-9041 (ext. 6381)
 1 University Drive Fax: 780-675-6468
 Athabasca AB T9S 3A3
 Canada

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Confirmation of receipt (e-mail/phone): _____