REGISTRATION INSTRUCTIONS:

1. Email Nicole at nicole.filizetti@uwsp.edu to verify if there are scholarships available or not, and to signify your intention of registering for either graduate credit or audit. Note: this email will allow your name to be "penciled in" on the list, but will not guarantee a scholarship. Only receipt of your payment and registration materials via regular mail will guarantee your spot and scholarship. **Please wait for a response before proceeding with step 2**.

2. *After* you have heard back from Nicole: Print the registration form and "partial payment plan credit agreement" on separate pieces of paper. (UWSP policy restricts these from being submitted back-to-back.) Regarding "application status": If you are enrolled in a UWSP graduate program you mark "Grad Regular." *All other participants* mark "Grad Special." This course is not available for undergraduate credit. Please note: we can only submit original, signed copies of these documents, not scanned, faxed or copied copies.

3. Send these two forms along with your payment for $100 (check written out to LEAF) to:
   LEAF attn: Sarah Gilbert
   900 Reserve St.
   UWSP, 403 LRC
   Stevens Point, WI 54481

4. You will receive a confirmation email that contains some follow-up questions after your materials are received. Please respond to this email. Note: the university mail system tends to take a bit longer. If you feel like a lot of time has passed and you have not heard from us, feel free to email back and check on the status of your materials.

5. You will hear from your instructor about a week before class starts.

6. Thank you!

UWSP REGISTRATION FORM

Please see page one for registration and payment instructions. Must include proper payment.

Last Name	First Name	Middle	Maiden

UWSP ID# or Social Security Number **(required)**	Email Address **(required)**

Date of Birth (mo/day/yr) **(required)**	Home Phone	Work Phone

Home Address	City	State	Zip	County

High School Graduated From **(required)**	City/State	Year of Graduation

School Name/Employer	School/Employer Address	City	District	State	ZIP

Grade Level(s)/Position	Subject Area(s)

Application Status:

- ❒ **High School Student** (Youth Options Program) – 20
- ❒ **Undergrad Special** (taking undergrad courses but not toward a degree at UW-SP, or a student with a degree taking undergrad courses for teacher certification, additional majors or degrees, self improvement, etc.) – 9
- ❒ **Grad Special** (taking graduate courses, but not seeking a master's degree at UWSP) – 10
  NOTE: There is no guarantee that courses taken as a Grad Special can later be used to fulfill master's degree requirements.
  It is in your best interest to submit an application for Graduate Study if you might pursue a graduate degree in the future.
- ❒ **Grad Regular** (applied and accepted to a master's program at UWSP) – 11
  Grad Program of Study: _____ Advisor _____

Intended Graduate Degree ❒ **MA** ❒ **MEPD** ❒ **MMED** ❒ **MS** ❒ **MSE** ❒ **MST** ❒ **DOCTOR OF AUDIOLOGY**

Sex ❒ Male (M) ❒ Female (F)

Citizenship ❒ Citizen (C) ❒ Nonresident Alien (N)
❒ Permanent Immigrant (P)
Alien Registration No. _____

Veterans Benefits Status ❒ Not a Veteran (0)
❒ Receiving VA benefits (2) ❒ Veteran Not Receiving Benefits (9)

Racial/Ethnic Heritage
- ❒ African American/Black (B)
- ❒ American Indian or Alaska Native (N)
- ❒ Southeast Asia: Cambodian, Hmong, Laotian, Vietnamese (E)
- ❒ Other Asian/Pacific Islander (O)
- ❒ Hispanic/Latino (S)
- ❒ White/Non-Hispanic (W)

RESIDENCY:

- Have you, your spouse or parent(s) recently moved to Wisconsin to Accept Permanent Employment? ❒ Yes ❒ No
- Do you claim Legal Wisconsin Residence for tuition purposes? ❒ Yes ❒ No

- Indicate the dates you have lived at your present address From (mo/yr)_____ to (mo/yr)_____
- List former addresses (street, city, state) within the last two years
  _____ From (mo/yr)_____ to (mo/yr)_____
  _____ From (mo/yr)_____ to (mo/yr)_____
- Employment history and/or activities (other than school) for the last two years (include city/state)
  _____ From (mo/yr)_____ to (mo/yr)_____
  _____ From (mo/yr)_____ to (mo/yr)_____
- Parent's Name (City and State of residence within the last two years)
  _____ From (mo/yr)_____ to (mo/yr)_____
  _____ From (mo/yr)_____ to (mo/yr)_____

Mark your choice below. **Please Note: It is your responsibility to register correctly, as a resident or nonresident, under the law.**

Term	Prefix & num	Section	Credit/ Audit (Please choose 1)	Title	Location
Summer 2016	**NRES 624**	**88**	**1 GRAD** ____	**Enhancing School Forest Education**	**Online**
	NRES 624	**88**	**Audit** _____		

Have you previously taken courses offered by UW Stevens Point, either on-campus or off-campus?	Yes	No	Office Use Only N R

SEE PAGE ONE FOR REGISTRATION AND PAYMENT INSTRUCTIONS. MUST INCLUDE PROPER PAYMENT.

Do not print back-to-back!

UNIVERSITY OF WISCONSIN-STEVENS POINT
PARTIAL PAYMENT PLAN CREDIT AGREEMENT

I have read and agree to comply with the Partial Payment Plan Credit Agreement. I guarantee payments within the terms specified. All credit extended will be my obligation.

_____
Print Student Name

_____
Student Signature

_____
Date

_____

ALL STUDENTS must sign this agreement**.**

Under the partial payment plan charges are billed as follows

First Statement - Information only, no required payment is due at this time. Finance charges will be assessed on any unpaid balance as of the first day of each term.
Second Statement - Fifty percent (50%) of the balance plus finance charges will be due.
Third Statement - One hundred percent (100%) of any remaining balance plus finance charges will be due.

FINANCE CHARGES accrue starting the first day of each term.

ANY HOLDER OF THIS CONSUMER CREDIT CONTRACT IS SUBJECT TO ALL CLAIMS AND DEFENSES WHICH THE DEBTOR COULD ASSERT AGAINST THE SELLER OF GOODS OR SERVICES OBTAINED PURSUANT HERETO OR WITH THE PROCEEDS THEREOF. RECOVERY HEREUNDER BY THE DEBTOR SHALL NOT EXCEED AMOUNTS PAID BY THE DEBTOR HEREUNDER.

I UNDERSTAND I WILL BE RESPONSIBLE FOR ALL REASONABLE COLLECTION COST, INCLUDING ATTORNEY FEES AND OTHER CHARGES NECESSARY FOR THE COLLECTION OF ANY AMOUNT NOT PAID WHEN DUE.

Students choosing the partial payment plan shall pay FINANCE CHARGES, which will appear on the billing statement for each period in which the entire balance is not paid in full by the billing due date. The FINANCE CHARGE is calculated on the Previous Balance (exclusive of the previous FINANCE CHARGES) reduced by Payments and applied Credits as they are made during the billing period. The FINANCE CHARGE will be calculated at the periodic rate of .041095% per day or 1 ¼ % per month (ANNUAL PERCENTAGE RATE OF 15%) on that portion of the balance which is $500 or less, and at the periodic rate of .032877% per day or 1% per month (ANNUAL PERCENTAGE RATE OF 12%) on that portion of the balance which is in excess of $500.