AGE 60 AND OVER – AUDIT/CREDIT REGISTRATION

If you are a Wisconsin resident at least 60 years of age you may register for credit and/or audit using this form.

1. **To register for credit** -- identify the course and section below and fill in the reverse side of this page. Bring this form to Enrollment Services Center to complete your registration. Courses taken for credit will be billed at the full tuition rate.

2. **To register for audit** -- identify the course and section below and fill in the reverse side of this page. Bring this form to the Enrollment Services Center to complete your registration. Courses taken for audit only are free of charge, except for the cost of texts or materials, provided:
   
a. You show proof at the time of registration that you are or will be at least 60 years of age by the first class day of the course you want to audit. Please provide a copy of your driver’s license or birth certificate at the time of registration.
   
b. You meet the state residency requirements as provided by section 36.27(2)(e). Wisc. Stats. The text of the statute may be viewed at [http://www.uwsp.edu/news/uwspcatalog/financial.htm](http://www.uwsp.edu/news/uwspcatalog/financial.htm) under Wisconsin Residency Requirements or in the printed UWSP catalog.
   
c. You register on or after the first day the course meets but no later than the deadline for adding courses as published in the university timetable.
   
d. There is space available in the class **AND** the instructor approves your audit registration by signing in the section below on or after the first day of the term.
   
e. Please note the following limitations to an audit registration:
      
      ♦ You may not AUDIT courses that require participation such as private music lessons, or studio art, or courses where your attendance requires additional work for the instructor.
      
      ♦ To audit a course is to attend class regularly without having to take exams, do laboratory work, participate in class discussions, or do any other class work except to listen.
      
      ♦ You are eligible to use the library and most other university facilities as an auditor. However, since you do not pay segregated fees, you will not be eligible to use the services subsidized by these fees such as Health Services and the Health Enhancement Center.
   
f. Courses taken for credit are billed at the full tuition rate and courses taken for audit are free of charge, except for special course fees and the cost of texts or materials. If mixing credit and audit courses during the same term, you will be billed the full tuition rate for all courses.

<table>
<thead>
<tr>
<th>Course &amp; No. (e.g. History 176)</th>
<th>Section</th>
<th>Crs.</th>
<th>Instructor’s Signature (Only Required if Registering for Audit)</th>
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Complete this form by filling in the information on the next page. Then return this form to:

Enrollment Services Center, 106 Student Services Center
Email: esos@uwsp.edu
Fax: 715-346-3526
AGE 60 AND OVER – SPECIAL STUDENT AUDIT/CREDIT REGISTRATION

You must fill out all sections of this form. Please print or type.

SECTION I: GENERAL INFORMATION

Last Name_________________________________________ First Name_________________________________________ M.I.________

Previous Name(s)_________________________________________ (If previously enrolled at UWSP under a different name.)

Social Security Number_________ - _______ - _______; Student ID#____________________ (if known);

Home Address: (I have lived at this address since (mo/yr)_______________.)

Street & No. _______________________________________________________________________

City____________________ State______________ Zip Code______________

County__________________ Country (if not U.S.)______________ Area Code & Phone # ______________________

1. Date of Birth (mo/day/yr) (required) ______________________
2. Gender: ☐ Male ☐ Female
3. Marital Status: ☐ Not Married ☐ Married
4. Racial/Ethnic Heritage:
   ☐ White/Non-Hispanic ☐ African American/Black
   ☐ Asian/Pacific Islander ☐ Cambodian, Laotian
   ☐ Hispanic ☐ American Indian
5. Are you a U.S. Citizen? ☐ Yes; ☐ No  If no, indicate your Country of Citizenship:________________________
6. Are you a U.S. Veteran? ☐ Yes; ☐ No
7. High School of Graduation-Name, City, State___________________ High School Graduation Date:____

SECTION II: RESIDENCY AND EMPLOYMENT INFORMATION (To be completed by ALL applicants)

8. Do you claim Wisconsin as your legal residence? ☐ Yes; ☐ No  If you check YES, you MUST complete the remaining part of the residency section to claim Wisconsin as residence for tuition purpose.
   a. I graduated from a Wisconsin high school: ☐ Yes; ☐ No
   b. I last voted or registered to vote in (city/state): __________________ (mo/yr)____________________
   c. I have held a driver’s license only in Wisconsin since (mo/day/yr): __________________
   d. I have registered my motor vehicle(s) only in Wisconsin since (mo/day/yr): __________________
   e. I have filed a Wisconsin state income (not property) tax return every year since:__________
   f. List any former addresses with the last 2 years:
      Address (city/state)________________________________ Dates you lived there (from)________(to)________
      Address (city/state)________________________________ Dates you lived there (from)________(to)________

SECTION III: SIGNATURE

I certify that the above information is true and complete to the best of my knowledge. I understand that inaccurate information may affect my enrollment and/or tuition status. The information contained herein is subject to verification.

Applicant’s Signature_________________________________________ Date________________________