

## Marygrove College Registration Form

Date			ID	SSN		Term	Und	lergraduate	Graduate
Last Nam	e				Fi	rst Name			
Address				City			Stat	te Z	ip
PhoneCitizensh				nipVisa Ty			/isa Type _		
Check all	that apply:	Dorm	Student:	Receiving VA Benefits: Athlete:			In	International Student	
If guest student indicate home school									
Consortium student indicate school: U of D Mercy Madonna St. Mary's Sacred Heart									
Subject	Course No.	Sect.	If taken at another school list Host school course.	Course Title			Cr. Hrs	Irs Instructor Approval	
By registering for courses at Marygrove College, I agree to assume all financial responsibility for all charges that are billed to my student account including, but not limited to, tuition, mandatory fees, and course fees. By signing this form, I acknowledge I have read and understand the following provisions:  It is my responsibility to drop all classes during the 100% refund period, which is the first week of the semester, if I decide not to attend this semester and want a full refund. If I withdraw from any classes after the 100% refund period, I assume responsibility for paying all Student Obligations for this semester according to the Withdrawal/Refund Policy listed in the Marygrove College Catalog.  If my federal or institutional financial aid is either not received by Marygrove College or I later lose eligibility to retain financial aid for the semester, I assume responsibility for paying all Student Obligations for this semester;  If my third party sponsor (private employer, governmental agency, etc.) fails to pay Marygrove College by the end of the semester, I assume responsibility for paying the amount the sponsor originally promised to pay on my behalf.  A "HOLD" will be placed on my records if my student obligations remain unpaid after the official refund period ends for the semester. This will prevent me from registering for future semesters and receiving an official or unofficial transcript.  All collection, interest, late and attorney fees related to the collection of my student obligations will be paid by me to the full extent permitted by law.									
NOTE: Should a student register for classes, not attend and not notify Marygrove College, the student will be responsible for 100% tuition and fees regardless of the time frame.									
Acceptable methods of communicating the intention to drop or withdraw are:  1. By completing the appropriate form and submitting it to the Enrollment Center or the Registrar's Office  2. E-mail through Marygrove e-mail sent to <a href="mailto:registrar@marygrove.edu">registrar@marygrove.edu</a> .  By signing this form I acknowledge that I understand my responsibilities.									

Registrar's Office 09/10

Date \_\_\_\_\_

Student Signature \_\_\_\_\_Advisor Signature \_\_\_\_\_

\*

Office Processed: \_\_\_\_\_Advising \_\_\_\_\_ Enrollment Center \_\_\_\_\_ Registrar

Processed by \_\_\_\_\_

Return to the Registrar's office or fax to 313-927-1505.