

Student ID #

Eligible to Register Approved:

Initials Date

Zip

Female Male

Degree-Seeking Student

GRADUATE Non-Degree Cooperative Program Admission for UI Students

UNDERGRADUATE Non-Degree Cooperative Program Admission for UI Students

nnlete this form and send to III for initial processing. Co

University of I Fax #: 208-88	daho, Office		strar, BPC 119	
Semester: (choose one)	Fall	Spring	Year:	
University of Idaho Student	ID#		Vandals E-mail Addre	SS:
Legal Name:				
Last			First	Middle
Other and former names used	l:			
Current Address: Street			City	State
Date of Birth:				Gender (Optional):
Telephone (home)		(we	ork)	
Are you a citizen of the U.S.?	Yes	No		
If no, Country (if not L	.S.)		If no, Visa Type:	
Are you a Permanent Resider	it? Yes	No	Permanent Resident Card #:	
Ethnicity/Race (optiona	d):			
Are you Hispanic/Latino/Latina or of Spanish origin?			🗆 Yes 🗆 No	

Check all that apply: (optional)	American Indian/Alaska Native Asian Black/African American	Native Hawaiian/Other Pacific Islander White
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Prior Registration:

Have you ever attended Washington State L	Yes	No	
Date Last Enrolled:	WSU Student ID #		

Release Notification: The University of Idaho (UI) and Washington State University (WSU) will exchange information relevant to the determination of your financial aid eligibility. UI students may receive financial aid only from UI. Your registered credit hours at WSU and UI will be combined each semester to determine your enrollment level for financial aid eligibility. Credit hours must apply to your current degree objective to be included in your enrollment for aid purposes. Transcripts will be exchanged at the end of the semester and your credits from WSU will be recorded as transfer credit.

Please note: UI students participating in cooperative courses are responsible to pay WSU for any special fees associated with the course. Tuition will be assessed by the UI. UI students may not register at WSU for both cooperative and non-cooperative classes in the same term.

Signature

In signing this form, I authorize WSU officials to share my academic records, account information, and financial aid information with UI officials. I understand that by signing this release, I am waiving my right to keep this information confidential under the Family Education Rights and Privacy Act. I certify that my consent for disclosure of this information is entirely voluntary. I understand that this consent for disclosure of information can be revoked by me in writing at any time by contacting the WSU Registrar's Office, but will not affect the information released under my previous consent. I hereby certify that I am currently a graduate student at the UI in good standing and the above information is complete and correct.

Date