

**DEAFNESS SPECIALTY COURSE SEQUENCE APPROVAL FORM**Program Director approval required which will be obtained by Registrar's Office during processing Email completed form to: registrar@naz.edu

Three courses focusing on Deafness are available to community professionals seeking to increase their knowledge base.

Non-credit: 0 credit pass/fail option is available for ½ the tuition rate. Visit Students Accounts for tuition rates: https://www2.naz.edu/student-accounts/		Credit bearing: Students can earn 3 credits and receive a grade. Visit Students Accounts for tuition rates: https://www2.naz.edu/student-accounts/		
ast NameFirst Name		Social Security #		
Address				
City	State/Zip E-ma		E-mail Address	
Home Phone	Cell Phone		Work Phone	
Education Information				
College/University Underg	graduate Degree/Major		Date Degree Earned	GPA
Do you hold licensure or teacher certification	on?	yes, list license or certif	ication area/s:	
For Federal Reporting Purposes				
Date of Birth: Gender	:			
2. What is your race? Mark one or more with the Black or African American As Confirmation of Student Understance. By signing below, I confirm my understanding the performance. I also confirm my understanding the date. I understand that if a college debt must be including but not limited to, reasonable attorney.	sian American Indian  ding at continuation in subsequent I am responsible for tuit referred to outside sources	or Alaskan Native N ent courses is dependent of ion costs associated with the	ative Hawaiian or Other Pacif on program director approval and the course(s) and agree to pay tu	satisfactory academi
Printed Name		Signature		 Date
	OFFICE	USE ONLY		
Requirements for non-matriculation approval  Provision  Completion of undergraduate degree Background commensurate with cours	se material		Met ☐ Yes ☐ No ☐ Yes ☐ No	
Approval Granted by Program Director	` ` `	rsion (Pass/Fail)	please select one course below for a Credit Version (G	
Fall (list year)		SP 596*CE		raded)
Spring (list year)		SD 597*CE		
Summer A (list year)	_	SP 595*CE	☐ DSP 595*40	
Note – A new approval form will be required for	each semester of enrollme	nt.		
Approval by Program Director:				
Printed Name		Signature		 Date
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To obtain approval, send form to Registrar's Office for processing: registrar@naz.edu