



NEW GRADUATE STUDENT REGISTRATION FORM

Office of the Registrar ▪ Nazareth College ▪ 4245 East Avenue ▪ Rochester NY 14618
 Smyth Hall Room 1 ▪ Phone: 585-389-2819 ▪ Fax: 585-389-2612 ▪ Email: registrar@naz.edu

Complete the information below and return this form in person, by mail, fax, or email.

Last Name: _____ First Name: _____ Status: I am a new student in a graduate degree program

Nazareth ID# (or Soc. Sec. #): _____ * Note: Non-matriculated students will need to complete the Non-Matriculated Student Form

Start Term: Fall Spring Summer Year _____ Academic Program: _____

Address: _____ City/State/Zip: _____ Email: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

For federal reporting purposes: Date of Birth: ____/____/____

1. What is your ethnicity? Hispanic or Latino Not Hispanic or Latino
2. What is your race? Mark one or more races to indicate what you consider yourself to be.
 White Black or African American Asian American Indian or Alaska Native Native Hawaiian or Other Pacific Islander

 Student Signature/Date

 Advisor Signature/Date (*required*)

**Students starting in the summer should list all summer and fall coursework*

Preferred Course Selections		
Course Number (ex: SPF 501 30)	Semester	Credits

Alternate Course Selections	
(To be used if preferred sections are closed)	Credits

Please Note:

- Billing information is accessible via NazNet.
- You must register for at least 6 graduate credits to qualify for student loans. Contact the Financial Aid Office with questions: (585) 389-2310 or finaid@naz.edu.

OFFICE USE ONLY

Processed by: _____

Date: _____

Total Credits _____