



Lifelong Learning Credit Workshop Registration Form

Please note: All workshops are subject to cancellation due to low enrollment. We cannot process your registration without payment of fees. Fees are subject to change. **Withdrawal from a credit workshop must be done by 4:30 p.m. on the last business day before the start date of the workshop to receive a 100% refund.**

Return this form with payment to: Lifelong Learning, Miami University, 127 McGuffey Hall, 210 E. Spring St., Oxford, OH 45056
Phone: 513-529-8600, E-Mail: lifelearn@muohio.edu, Website: www.muohio.edu/lifelonglearning

Workshop Title	Advanced Dendrology for Teachers	Workshop Dates	July 13 - 24, 2009
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1	Legal Name (Place Jr., Sr., I, II, etc. after middle name) <small>Last First Middle</small>	Previous Names if any	SSN or Banner ID
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2	Mailing Address (Number and Street)	City	State	Zip Code
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Phone Number	E-Mail Address	County of Residence	
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3	Ethnic Status (This field is not required, but will aid our legal reporting obligations) <small>AI - American Indian/Alaskan Native HS - Hispanic/Latino/Chicano AS - Asian PI - Native Hawaiian/Pacific Islander BL - Black/African Amer (not Hispanic) WH - White (not Hispanic)</small>	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Country of Citizenship	Date of Birth
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4 Ohio Residency (Check all that apply)
For the purpose of determining fees, students are classified as Ohio or non-Ohio residents. Please check the box below that accurately represents your current residency. In addition, you may be requested to submit a complete residency application with all required documents.

I do not reside in Ohio (non-resident).
 I have lived in Ohio for at least 12 consecutive months prior to the enrollment and am not receiving any financial support from non-Ohio residents.
 I reside and am gainfully employed on a self-sustaining basis in Ohio and wish to pursue a part-time program
 I am on active duty in the United States military and am stationed and residing in Ohio, or I am a dependent of such a person.
 I am a dependent student with at least one parent or legal guardian residing in Ohio for at least 12 consecutive months prior to this enrollment.
NOTE: Ohio law requires that non-resident fees be assessed to male Ohio students who are between the ages of 18 and 25 and have not registered with Selective Service.

5 Educational Background (Check all that apply)

I am currently enrolled in high school.
 I am currently enrolled in college at _____
 I attended college at _____ for the following dates _____
 I previously attended Miami University for the following dates _____

6 Graduate Course Credit
This admission is for credit workshops only. If you would like to take other graduate level coursework, contact the Graduate School for application and admission. If you are not already admitted to the graduate school and wish to receive graduate credit, you must apply for Continuing Non-degree Graduate Standing (CGS).
 I am enclosing \$15 extra. Please use this form as my application for CGS admission.
A bachelor's degree is required to receive graduate credit for this workshop.
Highest degree earned _____ Institution _____ date degree earned _____

7 Workshop Credit Check credit status desired for each workshop Undergraduate Graduate

CRN	Dept. Abbr.	Course Number	Section Letters	Credit Hours	Symbol *	Instructional Fee	General Fee	Administrative Fee	Technology Fee	Resident Total Fees	Non-Resident Total Fees
41178	B O T	6 3 0.W		4	<input type="checkbox"/>	1607.12	180.52	20.00		1807.64	4079.52
					<input type="checkbox"/>						
					<input type="checkbox"/>						
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					<input type="checkbox"/>						
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					<input type="checkbox"/>						
					<input type="checkbox"/>						

* Place an x in the symbol column above to register workshop for credit/no credit. Leave symbol column blank for a letter grade. Total Due: \$

8 Have you ever been convicted of a criminal offense other than a minor traffic violation or are such charges currently pending against you at this time? Yes No
Have you ever been dismissed, suspended, or placed on probation for nonacademic reason by any secondary high school, college, or university (including suspension or dismissal under Ohio Rev. Code 3345.22 and .23, commonly called House Bill 1219)? Yes No
If you answer yes to either of these questions, you must submit a complete statement of explanation.

9 I certify that to the best of my knowledge the information given above is true and accurate. I understand that misrepresentation of facts on this application will be cause for refusal of admission, cancellation of registration, or dismissal from the University. In addition I agree that I am fully responsible for all fees associated with the above workshop(s).

Signature _____ Date _____
Instructor signature (if required) _____ Date _____

Roger Meicenheimer