THE STATE UNIVERSITY OF NEW JERSEY
RUTGERS
Camden

SUMMER SESSION 2009 REGISTRATION FORM

RETURN APPLICATION TO:

Rutgers University, Summer Session Office, 319 Cooper St, Camden, NJ 08102-1519
Phone: 856-225-6098 OR FAX: 856-225-6524; or VISIT OUR WEBSITE: http://summer.camden.rutgers.edu

PLEASE FILL IN ALL INFORMATION BELOW:

PERSONAL INFORMATION

LAST NAME _____ FIRST NAME _____ M.I. _____

DATE OF BIRTH: _____ MALE ☐ FEMALE ☐ STUDENT ID NUMBER _____
(if non-Rutgers, use Social Security)

PERMANENT HOME ADDRESS

STREET: _____

CITY: _____

STATE: _____ ZIP CODE: _____ PHONE: _____

I HAVE BEEN A LEGAL RESIDENT OF N.J. FOR ONE YEAR: _____YES _____NO

E-MAIL ADDRESS : _____

PLEASE CHECK ALL THAT APPLY:

_____ RUTGERS CAMDEN STUDENT, currently (SPR'09) in school (*CIRCLE ONE*): **50 52 53 56 64** GPA: _____

_____ OTHER RUTGERS CAMPUS STUDENT (not CAMDEN) - which school? _____ GPA: _____

_____ FORMER RUTGERS STUDENT - which school? _____ GPA: _____

_____ NON-RUTGERS STUDENT - which school? _____ GPA: _____

_____ NO COLLEGE AFFILIATION (If you wish to enroll in the Fall '09, you must apply separately to the Rutgers Admissions Office (856-225-6104)

_____ HIGH-ACHIEVING HIGH SCHOOL STUDENT (Include with your application: H.S. transcript, personal letter of interest, and recommendation from school official such as a guidance counselor.)

COURSE TITLE	SCHOOL CODE	SUBJECT NUMBER	COURSE NUMBER	SECTION NUMBER	REGISTRATION INDEX NUMBER	CREDIT HOUR	CR.HR. PREFIX	LIST ALL COMPLETED PRE-REQUISITES FOR YOUR COURSE SELECTION BELOW:
SAMPLE: English Comp II	50	350	102	A1	90001	3		English Comp I

YOU ARE RESPONSIBLE FOR THE COURSE TUITION UNLESS YOU DROP THE COURSE IN WRITING BY THE APPLICABLE DATE - EVEN IF YOU DID NOT ATTEND THE COURSE. NON-PAYMENT DOES NOT CONSTITUTE A WITHDRAWAL FROM CLASS. VERBAL TELEPHONE WITHDRAWALS ARE NOT ACCEPTED.

All the information I have provided on this form is true. I understand and shall adhere to all the academic policies and registration procedures of Rutgers University.

SIGNATURE OF APPLICANT: _____ DATE: _____

APPROVAL SIGNATURE: _____ DATE: _____
(Summer Session Office)