To maintain confidentiality, the University does not publish social security numbers on written reports, forms, electronic displays, or other communication unless required and/or permitted by law (Family Education Rights and Privacy Act of 1974). Social security numbers will be printed on official transcripts.

UNIVERSITY *of* ALASKA SOUTHEAST

JUNEAU CAMPUS
REGISTRAR'S OFFICE
11066 AUKE LAKE WAY
JUNEAU, AK 99801
TEL: (907) 796-6100
FAX: (907) 796-6365
uas.registrar@alaska.edu

KETCHIKAN CAMPUS
STUDENT SERVICES
2600 7TH AVE.
KETCHIKAN, AK 99901
TEL: (907) 225-6177
FAX: (907) 225-3624
ketch.info@alaska.edu

SITKA CAMPUS
STUDENT SERVICES
1332 SEWARD AVE.
SITKA, AK 99835
TEL: (907) 747-7700
FAX: (907) 747-7731
sitka.registrations@uas.alaska.edu

COURSE REGISTRATION

Campus
- ☐ Juneau
- ☐ Ketchikan
- ☐ Sitka

Semester/Year
- ☐ Spring/Year 20____
- ☐ Summer/Year 20____
- ☐ Fall/Year 20____

Degree
- ☐ Non-Degree Seeking
- ☐ Degree/Cert. Program

last name | first name | middle initial

UA ID# [or social security # - required for new students]

previous names | date of birth MM/DD/YY

☐ female
☐ male

preferred email address
Waitlist email notifications will be sent to the e-mail listed above

mailing address

city | state | zip code

daytime phone | evening/message phone

course ref #	subject	course #	section	course title	audit (Y/N)	credit	instructor approval*

***SIGNATURE REQUIRED IF STUDENT DOES NOT MEET MINIMUM REQUIREMENTS, REGISTERING AFTER THE START DATE OF THE CLASS OR FOR SPECIAL APPROVAL**

total credits ☐

I understand that by submitting this registration I am responsible for the tuition and fees associated with any course(s) for which I have registered, whether or not I successfully complete the course(s). I am responsible for dropping courses by the published deadlines to ensure charges are not incurred. If I default on this student account, I promise to pay for the collection, attorney, and legal fees fees necessary for the collection of any amounts owed to the University of Alaska, which may be based on a percentage at a maximum of 40% of the debt. If I do not pay, the university may take my Permanent Fund Dividend under Alaska Statutes 14.40.251 and 43.23.073 and pursue other collection methods. I also understand that past due debt may be reported to credit bureaus.

✖ student signature (required) | date

✖ UAS advisor signature (if required) | date

✖ UAS advisor printed name | date

✖ UAS registrar signature (if required) | date

Residency
Additional documentation may be required
- ☐ Alaska Resident

Date: _____
- ☐ Military - Active Duty
- ☐ Military - Dependent Child
- ☐ Other state:

High School
- ☐ Alaska high school:
- ☐ Other high school:

State:

Graduation date:

- ☐ G.E.D./State:

Date received:

Citizenship
- ☐ U.S. Citizen
- ☐ Non-U.S. Citizen

VISA Type:

Nation of birth:

Nation of citizenship:

Veteran
☐ Yes ☐ No

Please take a moment to confirm your race and ethnicity. Diversity in those we serve helps support grants for many student programs.

Ethnicity
- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

Race

American Indian or Ak Native
- ☐ Alaska Native – Other
- ☐ Aleut/Unangax
- ☐ Alutiiq/Sugpiaq
- ☐ American Indian
- ☐ Cup'ik
- ☐ Dené/Athabascan
- ☐ Dené/Athabascan - Ahtna
- ☐ Dené/Athabascan - Deg Xinag
- ☐ Dené/Athabascan - Dena'ina
- ☐ Dené/Athabascan - Gwich'in
- ☐ Dené/Athabascan - Han
- ☐ Dené/Athabascan - Holikachuk
- ☐ Dené/Athabascan - Koyukon
- ☐ Dené/Athabascan - Lower Tanana
- ☐ Dené/Athabascan - Tanacross
- ☐ Dené/Athabascan - Up Kuskokwim
- ☐ Dené/Athabascan - Up Tanana
- ☐ Eyak
- ☐ First Nations
- ☐ Haida
- ☐ Indigenous – Other
- ☐ Inupiaq
- ☐ Siberian Yupik
- ☐ Tlingit
- ☐ Tsimshian
- ☐ Yup'ik

Asian
- ☐ Asian - Other
- ☐ Chinese
- ☐ Indian (Asian Subcont)
- ☐ Japanese
- ☐ Vietnamese

Black or African American
- ☐ Black or African American

Native Hawaiian or Other Pacific Islander
- ☐ Filipino
- ☐ Guamanian
- ☐ Native Hawaiian
- ☐ Other Indigenous (Pacific Island)
- ☐ Pacific Islander - Other
- ☐ Samoan

White or Other
- ☐ White
- ☐ International Indigenous

METHOD OF PAYMENT
- ☐ Cash
- ☐ Check (No. _____)
- ☐ Other:_____

Name of agency, school or scholarship, etc.

For credit card payment,
contact the Business Office:

Juneau (907) 796-6267
Ketchikan (907) 228-4530
Sitka (907) 747-7737