REGISTRATION FORM
Oklahoma Wesleyan University

[ ] Check if High School Student
[ ] Check if new Student
[ ] Check if new address
Social Security Number: _____

Date: _____

SEMESTER
[ ] Fall _____
[ ] Spring _____
[ ] May _____
[ ] Summer _____

Name: _____

Permanent Address: _____

City/State/Zip: _____

STUDENT'S TELEPHONE #'S: Office: _____

Home: _____

Parents or Next of Kin: _____

Relationship to student: _____

Address: _____

City/State/Zip: _____

Telephone: (___) _____

SEX:
[ ] Male
[ ] Female

MARITAL STATUS:
[ ] Unmarried
[ ] Married

Do you plan to live in the dorm?
[ ] Yes [ ] No

Did you live in the dorm last semester?
[ ] Yes [ ] No

Anticipated Graduation Date: _____/_____
Month / Year

Email: _____

RACE/ETHNIC CATEGORY:
(Check all that apply)
[ ] Non-U.S. Citizen/Alien
[ ] Black or African American
[ ] American Indian or Alaska Native
Tribe: _____
Tribal Family Line:
[ ] Maternal [ ] Paternal [ ] Both
[ ] Asian
[ ] Hispanic or Latino
[ ] Native Hawaiian or Pacific Islander
[ ] White/Non-Hispanic

(Please check all that apply)
MAJOR:

[ ] Biblical Studies
[ ] Biblical Studies/Worship Arts
[ ] Biochemistry
[ ] Biology
[ ] Business
[ ] Chemistry
[ ] Christian Ministry (AAS)
[ ] Christian Missions/Persecuted Church
[ ] Certificate—Persecuted Church
[ ] Church Music
[ ] Communication Arts
[ ] Education: Business
[ ] Education: Elementary
[ ] Education: English
[ ] Education: Mathematics
[ ] Education: Music
[ ] Education: Physical Education
[ ] Education: Science
[ ] Education: Social Studies
[ ] English
[ ] English Bible
[ ] English Bible/Worship Arts
Exercise Science:
[ ] Clinical Fitness Prog Mgmt
[ ] Non-Clinical Fitness Prog Mgmt
[ ] Pre-Therapy
[ ] General Science
[ ] General Studies (AA)
[ ] History/Political Science
[ ] Intercultural Ministry
[ ] Management Information Systems
[ ] Management & Leadership
[ ] Mathematics
[ ] Music
[ ] Nursing
[ ] Pre-Nursing
[ ] Pastoral Ministry
[ ] Pastoral Ministry/Biblical Studies
[ ] Pastoral Ministry/Music Ministry
[ ] Pastoral Ministry/Youth Ministry
[ ] Psychology
[ ] Social Sciences/Pre-legal Emphasis
[ ] Social Studies/History
[ ] Sports Ministry
[ ] Undecided
[ ] Other: _____

Dept.	Num.	Course Name	Sec #	Time	Days	Room	Cr	Professor
		CHAPEL		10:10 – 11:10	W F	Chapel		

NOTE: Once your courses are entered into the computer at the Registrar's Office and your contract has been signed at the Student Accounts' Office, you are OFFICIALLY REGISTERED. TO CHANGE OR WITHDRAW from courses it will be necessary for you to complete a drop/add form in the Registrar's Office.

_____
Director, Advising Center

_____
Advisor's Signature