

CSRT REGISTRATION FORM

DATE: _____

TERM (PLEASE CHECK ONE)

- _____ FALL 2008 **\$370.00 PAYMENT DEADLINE IS OCTOBER 3, 2008**
_____ SPRING 2009 **\$370.00 PAYMENT DEADLINE IS FEB. 6, 2009**
_____ SUMMER 2009 **\$TBA PAYMENT DEADLINE IS JUNE 17, 2009**

NAME	
ADDRESS	
CITY, STATE, ZIP	
LAST 4 OF SSN	
TELEPHONE #	

Student Signature: _____ Date: _____

You must be enrolled at Hampton University the semester you apply to graduate. An "Application To Take Courses At Another Institution" must be on file in the Office of the Registrar before this form will be processed in its entirety. Payment must accompany this registration form. ***All copies must be stamped PAID for validation.*** Acceptable methods of payment include cash, cashier's check, money order, VISA, MasterCard, American Express, and Discover. **No personal checks accepted.**

Mail this form with payment to the Office of the Treasurer, Hampton University, Hampton University, Hampton, Virginia 23668 or make payment at the Cashier in Whipple Barn to begin the registration process.