# UMass Boston / Vision Studies Program

Fall 2016 Course Registration

Once you have filled out this form please print it out and then mail, email, or fax it in.

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| PERSONAL INFORMATION First, Middle initial, Last name**:**  Date of Birth (MM/DD/YY)**:**  Sex: Male Female**:**  Email Address: Street Address**:**  City, State, Zip**:**  Daytime Phone**:**  Evening Phone**:** | **Ethnic Survey Information:**   1. American Indian/Alaskan Native 2. Black Non-Hispanic 3. Asian or Pacific Islander 4. Hispanic 5. Non-resident Immigrant 6. White Non-Hispanic |

Student ID # (8 digits following "ums" in your Blackboard login name):Social Security #**:** *(optional if Student ID# is entered above)*

Are you a Massachusetts resident? Yes / No**:**

Have you taken courses at UMass Boston before? Yes / No**:**

## COURSE SELECTIONS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Class # (Ex: 4511)*** | ***Department & Catalog # (Ex VISN 603)*** | ***Course Title (Ex: Braille I )*** | ***Credits (Ex 3 or 4)*** | ***Course Fee ($1200)*** |
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|  |  |  |  |  |

(All fields for a course are required – Information on courses can be found at [www.nercve.org](http://www.nercve.org/))

## METHOD OF REGISTRATION

Mail**:**  Fax**:**  Email**:**  Walk-in**:**

## METHOD OF PAYMENT – Registration is not complete until payment is received.

I am paying by check**:**  (*Make checks payable to UMass Boston. If you are registering by mail, send this form along with your check to:* Laura Bozeman/Vision Studies UMass Boston *Bayside 4th floor Rm 428, 100 Morrissey Boulevard, Boston, MA 02125-3393)*

I am paying in cash**:** (*Once you have registered, you can make a cash payment at the Bursars Office (Campus Center, 4th floor)M-Th 8 am - 4:30 pm, F 8:00 am - 4:00 pm.)*

I am using Vision Studies grant money (OSEP TVI, OSEP O&M, or RSA)**:**

am paying through Wiser (Y.N)**:**

## CALCULATE FEES

Course Fee Total**:**

Records Fee ($10; required of non-matriculated students)**:**

## TOTAL to be paid:

## MATRICULATED STUDENTS

**I have checked my account in WISER and cleared all holds (Y/N):**

## HEALTH INSURANCE WAIVER

1 week before courses begin, matrculated students must waive the Student Health Insurance Plan found at<http://www.healthservices.umb.edu/Waivers_pop.htm> .***Failure to waive this will result in a significant charge for health insurance****.*