



School of Undergraduate Studies

Non-matriculated Student Registration Form

Please print using a dark pen and email a photo or scanned image of the completed form to registrar@chc.edu. The completed form may also be faxed to us at **215-242-7714**. Proof of pre-requisites may be required to confirm your registration; you will be notified if a transcript is needed. You will receive a statement of account for payment shortly following receipt of this form.

Name															
Address															
City							State			Zip					
Cell	()						Phone	()							
Email															
SSN*							Birth Date	D	D	M	M	Y	Y	Y	Y
Emergency Contact Information															
Name							Relationship								
Phone	()						Email								

Please register me for:

<i>SAMPLE COURSE: RLST-104 01 M</i>			
Department (RLST)	Number (104)	Section (01)	Location (M)

Please check:

- I am aware that this application is for enrollment in undergraduate courses as a non-matriculated student at Chestnut Hill College.
- I have checked with my current institution to ensure this course meets any requirements.
- I am aware I am responsible for all financial obligations related to the courses indicated on this application.
- If I wish to DROP or WITHDRAW, I understand I must comply with the deadlines as they appear on the academic calendar.
- If I wish to have these courses reported to a home institution, I will make a transcript request in writing and pay the associated transcript fee.
- I understand I must comply with all student-related policies as described in the Academic Catalog and the Student Handbook (both available at www.chc.edu.)

Student Signature _____ **Date** _____

Parent/Guardian Signature (If under 18) _____ **Date** _____

* Your Social Security number is required to register for courses at Chestnut Hill College. The fax machine is in a secure office attended by an Office of the Registrar associate. We adhere to all FERPA regulations for the protection and dissemination of personal and educational information.