

Mail or fax completed form to:
 Ferris State University, Extended and International Operations
 410 Oak Street ALU 113, Big Rapids, MI 49307.
 Phone: (231) 591-2340 or (800) 562-9130. Fax (231) 591-3539.

Application for Admission and Registration – Professional Development Courses

Please print in ink or type the information on this application. Form must be completed with all required information, signed, and returned with payment to be registered for the course. Required fields are bolded text and marked with an asterisk (*).

Section A: Program & Location

Program Name: _____ Location: _____
 Applicant Status: New Student Former Ferris Student Semester: Fall Spring Summer
 Year: 2018 2019 2019

Section B: Student Information

*Name _____
 *First Name Middle Name *Last Name Suffix (Jr., Sr., IV, etc..) Previous Last Name (if any)
 *Date of Birth: _____ *Email: _____
 Country of Birth: _____ Country of Birth: _____
 Citizenship: _____

Please note the responses to the questions below are voluntary and will neither be shared nor used to deny access, admission, or financial aid. Some of the wording that follows has been recommended by the federal government. This information is collected for federal reporting purposes only.

Gender: Male Female Other/Prefer Not to Respond
 Are you a veteran, an active member of the military, a member of the National Guard or military reserves, or the spouse or dependent of a veteran, active member of the military or member of the National Guard or military reserves? Yes No
 Are you Hispanic/Latino? Yes No
 Race (select all that apply): American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander White
 Social Security Number: _____

If you wish to receive financial aid (scholarships, Federal aid, etc.) or wish to work on campus, your Social Security Number is needed. If you wish to have your information reported to the IRS without penalties, your Social Security Number is needed, even if you do not plan to use the information for federal income tax credits. If you do not provide your Social Security Number, you may be subject to a yearly penalty fee charged to your student account imposed by the IRS according to IRS federal regulation §1.60505-1. Your Social Security Number will not be used as your student identification number.) Voluntary: Information gathered will be used for compiling institutional data. It will be kept confidential and WILL NOT be used as a factor in the admissions process. Failing to provide this information will not result in any adverse treatment of the applicant.

Section C: Mailing Address

*Street 1: _____ Street 2: _____
 *City: _____ *State/Province: _____
 *Postal Code: _____ *Country: _____
 Home Phone: _____ Cell Phone: _____

Section D: Emergency Contact

*Full Name: _____ *Relationship: _____
 *Street 1: _____ Street 2: _____
 *City: _____ *State/Province: _____
 *Postal Code: _____ *Country: _____
 *Phone: _____

Section E: Course Registration & Payment

(Payment must be submitted with this form. Make checks payable to Ferris State University.)

Course/Section	Title	Location	Credit(s)	Tuition/Fees
<input type="radio"/> EDUC 694 MHA	Forest, Fields & Fins: NRF Ex	Roscommon, MI	3	\$610/credit hour
<input type="radio"/> EDUC 694 MHB	Environmental Educ (EE) Project	Roscommon, MI	3	\$610/credit hour
<input type="radio"/> EDUC 694 MHC	Teachers in the Wild	Roscommon, MI	3	\$610/credit hour

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Section F: Misconduct Questions (Response Required)

Misdemeanor/Suspended: Have you ever: a) been convicted, plead guilty, no contest or nolo contendere to a misdemeanor offense(s) OR b) for disciplinary reasons, been expelled, suspended for a week or longer, placed on disciplinary probation, or been subject to any other disciplinary action at any college or university (including Ferris or Kendall) you have attended? If you answered "yes", you must provide the approximate date of each incident, explain the circumstances and the outcome. ○Yes
○No

Felony: Have you ever been convicted, plead guilty, no contest or nolo contendere to a felony offense(s)? If you answered "yes", you must provide the approximate date of each incident, explain the circumstances, including all elements of sentencing (to include fines, periods of jail/prison, parole or probation). ○Yes
○No

Section G: Signature

I certify that I have completed the application accurately and understand that I will not have the opportunity to edit to this application after I click submit. By clicking, I have indicated my agreement with the following statement: I understand that withholding information requested or giving false information on this application may make me ineligible for admission to or enrollment at Ferris State University.

Signature of Applicant

Date

In compliance with the Clery Act, Ferris State University has published its Security and Fire Safety Report: ferris.edu/safety/clery-act-emergency-notification.htm.

Ferris State University is committed to assuring equal opportunity to all persons regardless of race, color, religion, national origin, ancestry, disability, or sex. This policy pertains to admission to the university and is in compliance with all federal laws including Title IX of the Educational Amendments of 1972.

Ferris State University is an equal opportunity institution. For information on the University's Policy on Non-Discrimination, visit ferris.edu/non-discrimination.