

OHSU OGI School of Science & Engineering REGISTRATION FORM

Department of Graduate Education, 20000 NW Walker Road, Beaverton, OR 97006
(503) 748-1382 phone / (503) 748-1285 fax / grad_ed@admin.ogi.edu / www.ogi.edu

Quarter: _____ Year: _____ Student ID _____ - _____ - _____

Non-matriculated / Master / Ph.D. Major: _____

Legal Name: (First MI Last) _____

Mailing Address (Street, City, St, Zip): _____

Phone: (home) _____ (business) _____ Email: _____

Employer _____ Date of Birth: ____/____/____

Are you a US citizen: Permanent Resident: or Non-US Citizen - Citizenship: _____ Visa Type: _____

Are you an Oregon resident? (residing in the state for the last 12 months for purposes other than school) Yes / No

Gender: Male / Female

The following item is optional and will only be used for aggregate reporting purposes:

Ethnicity: White Black/African American Asian/Pacific Islander Hispanic American Indian

CRN	Course #	Title of Course	Instructor	Credit/ Audit	# of Credits

All full-time matriculated students must either show proof of health insurance or obtain coverage through OGI

By signing here I acknowledge that I understand that I have certain rights regarding the gathering, use, and disclosure of my student records. Most of the records OHSU maintains with regard to a student can be disclosed without the student's written consent only to the student, OHSU officials, financial aid sponsors (when the student has applied for or received aid) or government agencies upon receipt of lawful subpoenas.

OHSU can release "directory information" without obtaining a student's prior consent. At the Oregon Health & Science University, this information is limited to the student's name, campus address, email addresses, campus phone numbers, attendance dates, degrees and awards received, credits earned, and whether a student is registered full or part time. A student can request directory information not be disclosed by filing a written request with the OHSU Registrar.

Signature _____ Date _____

For payment/third party billing information, please call 503-494-8243.

Entered into system by:

Date: