Registration Form – University of New Hampshire at Manchester

PLEASE DOWNLOAD OR PRINT THIS FORM AND COMPLETE ALL ITEMS. RETURN YOUR COMPLETED FORM TO:
EMAIL: UNHM.REGISTRATION@UNH.EDU | **FAX:** 603-641-4125 | **MAIL OR IN-PERSON:** 88 COMMERCIAL STREET, MANCHESTER, NH 03101

Student ID Number or Social Security Number *
• *SSN required of all new students for government reporting purposes. Returning students enter student ID #.*

Full Last Name | Full First Name | M. Initial

Today's Date

Other names used previously within the University System: _____

Male ☐ Female ☐

NH Res. ☐ Non Res. ☐

FOR OFFICE USE
Level ☐ Campus ☐ College ☐

VETERAN STATUS
☐ Vet using benefits
☐ Dependent using benefits
☐ Vet using Voc. Rehab

Birthdate ** (Month / Day / Year)

** *Birthdate is requested for identification purposes only.*

ETHNIC BACKGROUND (*Optional*)
For federal government stats only
1. Hispanic or Latino? ❑ yes ❑ no
2. Am. Indian-Alaska Native ❑
Asian ❑
Black or African American ❑
Native Hawaiian or other Pacific Islander ❑
White ❑
Other ❑

Local Mailing Address
Street/RFD/Box

City/Town | State | Zip

Home Phone | Cell Phone | Business or other daytime phone | Ext.

E-mail address

Are you currently admitted to a degree program at Manchester or Durham? ❑ No ❑ Yes _____ (Campus) _____ (Degree Sought)

Have you previously taken a course at Manchester or Durham? ❑ No ❑ Yes _____ (Approximate Date and Campus)

What degree do you hold? ❑ Associate ❑ Bachelor's ❑ Master's ❑ Doctoral ❑ None

Course Dept.	Course No.	Credit Course Title	Course Ref. No. (CRN)	No. of Credits

Advisor's Signature

RAC#

For Office Use

Total due:

Processed by:

Date:

Comments:

X Student's Signature _____

Payments for tuition and fees are collected in the Student Accounts Office.

University of New Hampshire at Manchester

University of New Hampshire at Manchester
88 Commercial Street, Manchester, NH 03101
603-641-4136 | fax: 603-641-4125

manchester.unh.edu