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HIGH SCHOOL ENROLLMENT FORM



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RECEIVED

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W_____

NAME: _____ UA ID (or SSN): _____
(Last) (First) (M I)

SEMESTER OF ENROLLMENT: _____ Date of Birth (DD / MM / YZ): _____

CURRENT MAILING ADDRESS: _____
_____ WZ}v W
Àv]vP WZ}v W
u]o CE ••W
(City) (State) (Zip)

Residency: ^šμ vš•• I]vP o •I v CE •] v Ç }CE Á]À CE }(v}vrCE •] vš •μCE Z CE P u
dμ]Ÿ}v_ }CE ^t]À CE }(E}vrZ •] vš ^μCE Z CE P _ v %CE}À] CE (μ]CE } μu vš Ÿ}v
.CE•š Ç }(]v•šCEμ Ÿ}v ~h } CE }(Z P vš• Z P μo Ÿ}v ZiñXiñ•X ^ CE Á CE• •]

DEMOGRAPHIC INFORMATION: ^ CE À CE• •] (}CE]v(}CEu Ÿ}v v } •X
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¹ RESIDENT AND NON-RESIDENT TUITION

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vœ}oou vš L œ u}œ šZ v šÁ}rÇ œ • v œ }v•] œ
v}vrœ •] vš• µvÿo šZ Ç •µ u]š v ^ %o%o] ÿ}v