Cambridge College Registrar's Office Cambridge College 500 Rutherford Avenue Boston, MA 02129 Phone: 617.873.0101 Fax: 617.242.0026 registrar@cambridgecollege.edu	Non-Matriculated Student Registration Form For students not in a degree or certificate program Term Fall Spring Summer Year:		Student ID# Your Cambridge College Location Boston Puerto Rico Lawrence Southern California Springfield Other
Student Information	PLEASE PRINT CLEARLY and COMPLETE ALL INFORM	ATION	
Last name	First name		Middle name
	Apt)
	State Zip		
E-mail (required) home v	/ork		
Social Security number	Date of birth: Mo	nth Day	Year
Emergency contact: Name		Phor	ne ()

Courses

Course # example: WRT101	Section example: CA01	Course Title	Instructor	Credits

Registration cannot proceed if there is a RESTRICTION or HOLD on your account.

Students Not in a Degree or Certificate Program — Important

- As a non-matriculated student, I acknowledge that I am allowed to take up to nine credits. (Certain exceptions based on program, alumni status or location may apply.)
- Although the courses I complete at Cambridge College as a non-matriculated student may be evaluated for acceptance into a Cambridge College program, I know that there is no guarantee that they will be accepted.
- As a non-matriculated student, I acknowledge that I will not have an academic advisor assigned. However, it is recommended that I seek academic advice from the dean, program chair or regional center director. Courses may not qualify for state licensure programs.

By signing, I acknowledge that I have read and understand the policies above and the implications for my academic goals.

Demographic Information

Gender:	Male	E Female	Transgender	Other
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Are you Hispanic/Latino: Not Hispanic/Latino Hispanic/Latino

Please check off one or more of the following that best describes yourself:

American Indian or Alaska Native
Asian
Black or African American
Native Hawaiian/Other Pacific Islander
White
Prefer to not respond

Country of birth: _____

Country of citizenship: ____

Are you a member of the U.S. Armed Forces?

After completing form submit it to:

Registrar's Office Cambridge College 500 Rutherford Avenue Boston, MA 02129

Or email to: registrar@cambridgecollege.edu Or fax to: 617.242.0026

Student signature

on paper printout

Date ____