



# BIOGRAPHIC AND DEMOGRAPHIC INFORMATION SUMMER SESSION YEAR \_\_\_\_\_

NAME \_\_\_\_\_ SSN \_\_\_\_\_  
Last First Middle

### ADDRESS INFORMATION:

CURRENT MAILING ADDRESS: \_\_\_\_\_

### BILLING ADDRESS:

**NOTE:** This is the person whom additional charges should be billed \_\_\_\_\_

SUMMER MAILING ADDRESS: \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ EVENING PHONE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ (mo/day/yr) PLACE OF BIRTH \_\_\_\_\_ SEX  M  F

### DEMOGRAPHIC INFORMATION:

**Note:** This information in the demographic section is optional. Answers to these questions will not be used in a discriminatory manner. Your cooperation is appreciated.

Are you Hispanic/Latino?  Yes, Hispanic or Latino (including Spain)  No

Regardless of your answer to the prior questions, please select one or more of the following ethnicities that best describe you:

- American Indian or Alaska Native (including all Original Peoples of the Americas)
- Asian (including Indian subcontinent and Phillipines)
- Black or African American (including Africa and Caribbean)
- Native Hawaiian or Other Pacific Islander (Original Peoples)
- White (including Middle Eastern)

**DOMICILE:** Do you wish to claim tuition rates based on Virginia Domicile?  Yes  No \_\_\_\_\_

If yes, in which Virginia county or city are you a resident? \_\_\_\_\_

You must complete the **Virginia In-State Tuition Form** and submit it with this form.

### ACADEMIC INFORMATION:

**Have you attended the University of Mary Washington before?**  Yes  No

If yes, please list the dates of attendance: \_\_\_\_\_

**Have you been accepted as a degree-seeking student at Mary Washington for the Fall semester?**  Yes  No

**Have you attended another institution during the past calendar year?**  Yes  No

If yes, do you attest that you have earned at least a 2.0 grade point average and that you are/were in good academic standing?  Yes  No

Name of Institution and Dates of Attendance \_\_\_\_\_

**Please read and sign the Honor Pledge, Arrangements Agreement, and Citizenship Statement on the right side of this form.** Also, you will need to complete a transcript request in the Office of the Registrar to have your transcript sent to your home institution at the conclusion of the summer session.

**Please read the UMW Education Records policy** at <http://academics.umw.edu/registrar/ferpa-policies-procedures-services/ferpa-and-educational-records/>

### HONOR PLEDGE:

*Your registration as a student at the University of Mary Washington is not complete without you signature affixed to the Honor Pledge below. The Honor Pledge applies to every student enrolled at the University. Every student is required to sign the Honor Pledge as part of the application process.*

I, as a student at the University of Mary Washington, do hereby accept the Honor System. I have read the Honor Constitution, understand it, and agree to abide by its provisions. Accordingly, I resolve to refrain from giving or receiving academic material in a manner not authorized by the instructor, from illegally appropriating the property of others, and from deliberately falsifying facts. I acknowledge that, in support of the Honor System, it is my responsibility to report any violations of the Honor Code of which I am aware, and that is my duty to participate as an honor trial juror if called upon to serve, unless officially excused. I realize that, in the event of a violation of the Honor Code, a plea of ignorance will not be acceptable, and that such a violation could result in my permanent dismissal from the University. I further pledge that I shall endeavor at all times to create a spirit of honor, both by upholding the Honor System myself and helping others to do so.

\_\_\_\_\_  
*Student Signature*

### Academic and Financial Arrangements Agreement:

I understand that this registration is subject to all terms and conditions, financial and otherwise, set forth in the current Academic Catalog and other official documents. Further, I accept all terms and conditions, financial and otherwise, which are in effect during the entire period of my enrollment at the University. I agree that, in the event of default of payment in any form, I am responsible for penalties as published by the university and for all reasonable administrative cost, collection fees, or attorney fees incurred in the collection of whatever funds are due.

\_\_\_\_\_  
*Student signature (or parent/guardian if student is younger than 18 at the time of registration)*

**Citizenship:** Country of Citizenship \_\_\_\_\_

If not a United States Citizen, please indicate

Permanent resident;  VISA holder;

If VISA holder, indicate type \_\_\_\_\_