OSU - Individual Study Enrollment Application

Today's	Date

Last Name (please print)	1								
Date of Birth (MM/DD/YY)	Last Name (please print) First		First		(No				
3. Malling Address Street Street City State Zip or Postal Code 4. Permanent Address Street City State Zip or Postal Code Home Telephone Daytime Telephone E-mail Address 5. Course Prefix and Number/Course Title Course Cost Course Cost NOTE: Visit is okstate edu for complete information on course, tuition and fees. IMPORTANT 6. Are you currently enrolled at OSU? Yes No If Yes, what is your OSU College: X Applicant's Signature 7. How did you hear about IS courses? (a) Advisor or counselor, (b) faculty member, (c) other students, (d) employer, (e) brochures, (inewspaper or magazine ad, (g) other: No	2						n-000 student	u30 00π)	
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IMPORTANT 6. Are you currently enrolled at OSU?	5. Course Prefix and Number	/Course Title		Course Cost	Course Prefix and Nun	nder/Course Title		Course Cost	
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8. Payment Information Make check or money order payable in U.S. dollars to: Oklahoma State University Individual Study (Please call the Individual Study office, (405) 744-6390, to verify the total cost of the course.) Bursar (Current OSU Stillwater/Tulsa I.D. required) ONOT EMAIL CREDIT CARD INFORMATION TO INDIVIDUAL STUDY Credit Card Number Exp Date Cardholder	X Applicant's Signato 7. How did you hear abo	ure	′ (a) Advisor (or counselor, (b)	faculty member, (c)) other students, (d) e			
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Billing Address 3- digit code	Credit Card	Number			Exp Date	Cardhol	der		
	Billing Ad	ldress				3- digit o	ode		

Send completed and signed application, and payment to:

Oklahoma State University Individual Study 317 PIO Stillwater, OK 74078

Phone: 405-744-6390 or FAX: 405-744-3420

For More Information

Email: ics-inf@okstate.edu

Web: is.okstate.edu

OFFICE USE ONLY

- O Receipt emailed to student
- O Receipt for Deposit & records
- O Copy of Enrollment to Bursar
- O Banner ID recorded