

OSU Individual Study Registration

Semester-based Courses **Spring** Summer Fall

Today's date _____

1. Last Name (please print) _____ First _____ Middle _____ CWID _____

2. Date of Birth (MM/DD/YY) _____ Previous Last Name _____ Male NEW PREVIOUS TERM
 Female

3. U.S. citizen: Yes No If No, list country of citizenship _____ Oklahoma resident: Yes No

4. Mailing Address* _____
 Street _____ City _____ State _____ Zip or Postal Code _____

5. Permanent Address _____
 Street _____ City _____ State _____ Zip or Postal Code _____

Home Telephone _____ Daytime Telephone _____ E-mail Address _____

***NOTE:** Materials are shipped UPS. Please provide street or rural route rather than P.O. box.

6. Course Information

Course Prefix and Number/ Course Title	Estimated Total Course Cost
-	
-	
-	
-	
-	
-	
-	
-	

OFFICE USE ONLY

Tuition Fee	_____	_____	_____
Administration Fee	_____	_____	_____
Technology Fee	_____	_____	_____
Record Maint. Fee	_____	_____	_____
Shipping	_____	_____	_____
Materials Fee	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Total	_____	_____	_____
Entered By _____	Date _____		

Send used texts if available.

7. Fees to be paid by (if other than student): _____
 Letter of eligibility or signed, dated purchase order must accompany application under any assistance program.

X Applicant's Signature _____

8. Payment Information

- Make check or money order payable in U.S. dollars to: Oklahoma State University Individual Study
- Bursar (Current OSU Stillwater/Tulsa I.D. required)
- MasterCard Visa



DO NOT EMAIL CREDIT CARD INFORMATION TO INDIVIDUAL STUDY

Credit Card Number _____

Exp Date _____

Cardholder's Signature _____