SETON HALL UNIVERSITY REGISTRATION FORM FOR SUMMER 2020 PRE-COLLEGE PROGRAM FOR HIGH SCHOOL STUDENTS

SECTION A:					
Name:					
LAST	LAST FIRST		MIDD	MIDDLE	
Address: STREET			Telephone Number: () HOME OR CELL	
CITY	STATE	ZIP	Email:		
Date of Birth:		-			
Sex: [] M [] F	Citizenship: [] US	Other (specify country	y and Visa Type)		
Have you participated	d in Seton Hall's Project A	cceleration through ye	our high school?		
Which high school do	o you currently attend?				
How did you learn ab	oout the Pre-College Progra	am?			
The tuition and fees a	are \$2,055.00. (\$500.00/4-	credit course + \$55 su	ımmer university fee)		
Submit the registration	on form and payment by Ju	ly 1, 2020 and mail to	Susan Brennan (contact in	formation below).	

Submit the registration form and payment by July 1, 2020 and mail to Susan Brennan (contact information below). To cancel a course registration, please advise Susan Brennan by email <u>before</u> the add/drop period of the course ends. The deadline for dropping a summer course is the end of the day of the second scheduled class. Delays in this notification may preclude you from dropping the course and result in the forfeiture of tuition.

To have a transcript sent go to www.getmytranscript.org and select Seton Hall University as the school you are sending from. There is a \$6.00 charge for each transcript requested

Contact Information:

Susan Brennan, Assistant Registrar Seton Hall University 400 South Orange Ave. Bayley Hall, Room 14 South Orange, NJ 07079 susan.brennan@shu.edu phone: (973) 275-2438

Please register me for the following course/courses:

COURSE SELECTION

Course Number	CRN	Course Title	Credits	Class Day/Time

Parent or Guardian Signature	Date	Student Signature	Date

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SECTION B : To be Completed by High School	Guidance Counselor				
I certify that the above-named student is currently enrolled and in good academic standing with a cumulative GPA of 3.2 or higher. This student is recommended for participation in Seton Hall's Pre-College Studies Program.					
Print name of High School					
Name:	Title:				
Signature:	Date:				

Please direct any inquiries related to our Pre-College programs to:

Dean Karen Passaro

Division of Continuing Education and Professional Studies

Phone: (973) 761-9087 E-mail: ceps@shu.edu