



**UA Distance Learning
Optical Sciences Course
Registration and Payment Form**

**Spring 2012
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Instructions

- Print both pages of this form and **fax it** along with your payment information to (520) 621-3269 or you can **mail it** to UA Outreach College, University Services Building, Room 322, P.O. Box 210158, Tucson, AZ 85721-0158.
- If you select the Tuition Payment Plan option, mail or fax the agreement form with your registration along with your initial payment. (http://www.outreachcollege.arizona.edu/pdf/dist/tuition_payment_plan_121.pdf)
- If you have questions, email distance@email.arizona.edu or call 520-626-2079 or 800-478-9508.
- All tuition and fees are payable upon registration unless you are selecting the Tuition Payment Plan or have a Purchase Order or signed agreement to pay from your employer.
- Complete all sections of this form.

Today's Date _____ U of A Student Number _____ SSN _____
(if assigned) (optional)

Name _____ DOB _____
Last, First, MI

Home Address _____
City, State, Zipcode and Country (if not US)

Day Phone _____ Evening Phone _____ email address: _____

Admission Status

I **have been admitted** to the U of A as:

I **have NOT been admitted** to the U of A.

Degree seeking

I applied online _____
(Date)

Non-Degree seeking

<https://apply.grad.arizona.edu>

Last semester attended*: _____

* If you took any breaks in attendance, you must reapply for Graduate non-degree admission.

Course Registration:

Dept	Course #	Course Title	# units	Delivery Option
_____	_____	_____	<input type="checkbox"/> credit <input type="checkbox"/> audit _____	<input type="checkbox"/> Video <input type="checkbox"/> +DVD
_____	_____	_____	<input type="checkbox"/> credit <input type="checkbox"/> audit _____	<input type="checkbox"/> Video <input type="checkbox"/> + DVD
_____	_____	_____	<input type="checkbox"/> credit <input type="checkbox"/> audit _____	<input type="checkbox"/> Video <input type="checkbox"/> + DVD

(Additional DVD fees apply per course if you select this option)



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Tuition and Surcharge

TUITION AND FEES ARE SUBJECT TO CHANGE.

- 1-unit courses in-state: \$1,157.00 out-of-state: \$1,831.00 x _____ # courses \$ _____
- 3-unit courses in-state: \$3,471.00 out-of-state: \$5,493.00 x _____ # courses \$ _____
- 4-unit courses in-state: \$4,628.00 out-of-state: \$7,324.00 x _____ # courses \$ _____

Non-refundable Fees

- AFAT (this fee is mandatory for all students) \$ 23.00
- UA Technology Fee (this fee is mandatory for all students) \$28.00 per unit x _____ # units \$.00
- Outreach College Registration Fee (this fee is mandatory for all students) \$ 25.00
- Tuition payment plan option enrollment fee: (\$75) \$ _____

Other Fees

- Mode of Delivery: Videostreamed (no charge) Videostreamed + DVD (\$750) per course \$ _____

Students taking 7+ units through our office please call 621-7724 for tuition and fee rates. **SEMESTER TOTAL \$ _____**

Payment Option: This section must be completed. Select "Full Payment" or "Tuition Payment Plan".

FULL PAYMENT:

- My payment in full is enclosed. Please charge my credit card for full payment – complete credit card information below.
- My company is paying - complete company payment information below

TUITION PAYMENT PLAN *enclose Tuition Payment Plan enrollment form:*

http://www.outreachcollege.arizona.edu/pdf/dist/tuition_payment_plan_121.pdf

First installment (due 1/11/12):

- My payment for all applicable fees plus 1/3 tuition is enclosed. Charge my credit card for all applicable fees plus 1/3 tuition.

2nd installment (due); 3rd installment (due):

- Charge the 2nd and 3rd installment payments to the credit card below.

I will remit the 2nd and 3rd installment payments before the applicable due dates. If payment is not received by the applicable due date, my credit card will be charged. **Failure to pay either installment on time revokes the agreement, and all unpaid tuition and fees will be payable immediately.**

Payment Information:

- Check enclosed, payable to "University of Arizona"
- Purchase Order (Full payment only – you must provide a copy of the PO):

P.O. # _____ Company name _____

Visa Mastercard American Express* Account # _____ Exp. Date _____

*You must include your verification code for Visa/MC - 3 digit number on back of card; AMEX - 4 digit number on front of card: _____

Name (as shown on credit card – please PRINT) _____ Billing Zip Code: _____

Signature: _____

(initials) **My initials indicate that I understand if I do not provide proper in-state documentation** within 10 days of registering I will be charged out-of-state tuition rates. **Check our website FAQ's "What Is Prop 300".**