

Registration Form

YORK COLLEGE OF PENNSYLVANIA
 York, PA 17403-3651 Tel. (717) 815-1273
 Registrar's Office registrar@ycp.edu

Summer Semester

NAME _____ ID# 90 _____
 Last First MI

YCP EMAIL _____ PHONE # _____

MAJOR _____ Undergraduate Graduate

Mini-Mester			Summer I			Summer II			Special Session		
Limit one 3 cr. or 4 cr. course, plus 1 PAW credit			Limit two 3 cr. or 4 cr. courses, plus 1 PAW credit			Limit two 3 cr. or 4 cr. courses, plus 1 PAW credit			*Individualized Studies - Engineering Co-ops; Experiential Learning/CCJ; Recreation Practicum; Directed Field Experience; SPM Work Experience; Tutorials; Independent Studies; Internships.		
CRN	Course #	Course Title	CRN	Course #	Course Title	CRN	Course #	Course Title	CRN	Course #	Course Title

Financial Information:
 Registration is subject to a paid deposit and clearance of any holds on your account. By signing this form you agree to pay the fees of any collection agency, which may be based on a percentage at a maximum of 33% of the debt, and all costs and expenses, including reasonable attorney's fees, we incur in such collection efforts of unpaid student account charges. Any unpaid debt may also be reported to the national credit bureaus which may adversely affect your credit score.

Student Signature (Required) _____ Date (required) ____/____/____