



# Non-Matriculating Course Registration

Visiting and non-matriculating students requesting to take courses at Keystone College should submit this completed form to the Registrar's Office.

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Please Print

Male  Female Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email\*: \_\_\_\_\_  
Please Print Clearly

*\*You will receive notification of your Keystone College network credentials to this email address 30 days prior to the start of classes.*

Are you currently enrolled at an institution other than Keystone College in a degree/certificate program?  Yes  No

Are you interested in pursuing a degree at Keystone College?  Yes  No Intended Major: \_\_\_\_\_

**Please indicate below your choice of courses:**

Course Number	Section	Course Title	Credits **	Semester/Term

*\*\*Please note that students are able to register for up to 12 credits before making formal application to the College.*

Please describe any special circumstances the College should be aware of regarding classroom access or course instruction on a separate sheet of paper to submit with this form. *Appropriate documentation must be received by the College at least two (2) weeks prior to the start of your intended term.*

Have you ever been convicted of a misdemeanor, felony, or other crime?  Yes  No  
If yes, please provide additional information on a separate sheet of paper to submit with this form.

I understand that I am solely responsible for all charges and fees resulting from registration for the course(s) above. I am aware that the refund schedule for these charges and fees is available at [www.keystone.edu/tuition\\_fees](http://www.keystone.edu/tuition_fees)

I understand that I may be subject to disciplinary action, including admission revocation or expulsion or denial of future admission, should the information I certified above be false.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Received

Initials

Date Processed

**Registrar's Office ■ One College Green ■ P.O. Box 50 ■ La Plume, PA 18440-0200 ■ (570) 945-8224 ■ [registrar@keystone.edu](mailto:registrar@keystone.edu)**

Keystone College is committed to providing equal educational and employment opportunities without regard to an individual's sex, race, religion, national or ethnic origin, pregnancy, age, marital status, sexual orientation, disability, or status as a veteran. Keystone College's commitment is to provide an environment where all students and employees can work and study free from discrimination including sexual harassment, sexual violence and sexual assault. The College policy is in accordance with state and federal laws and executive orders including but not limited to: Title VI, VII of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972, and the Americans with Disabilities Act of 1990. Visit [www.keystone.edu/title-ix](http://www.keystone.edu/title-ix) for additional information.