

Please note: The above fees cover tuition costs only. CMI and PAAI have an additional Special Fee of \$100 to cover extra costs of running the course. The Special Fee for EPAAI is \$200. The University also has fees associated with registration. Please visit <http://www.american.edu/aucentral/> for more details.

Housing: Limited campus housing for non-AU students (during the **MAY** session only). Please contact AU Housing and Dining for more information.
<http://www.american.edu/ocl/housing/>
202-885-3370

CCPS REGISTRATION FORM FOR NON-AU STUDENTS

If you are a non-AU student and would like to enroll in a CCPS course—send us this form along with your resume and a statement of interest. You will be billed by the University for the tuition and any fees associated with the course. You may fax your registration to 202-885-1038.*

PLEASE WRITE LEGIBLY

Name: _____

Name of class you wish to take _____

_____ January 20__ _____ May 20__ _____ June 20__(EPAAI)

Are you taking the course for ___ undergraduate credit, ___ graduate credit, or ___ not for academic credit? (For students seeking academic credit, the graduate tuition rate applies.)

***Statement of Interest:** Non-American University students who wish to enroll in an Institute – Campaign Management Institute (CMI), Public Affairs and Advocacy Institute (PAAI), or the European Public Affairs and Advocacy Institute (EPAAI) – should submit a brief essay, no longer than 1-page, explaining your experience in politics, your interest in the course, and how it would contribute to your career goals. This essay should be included along with your registration form.

Note: If you are not taking the course for academic credit, check the “No Credit” box. **However, please note that for the Campaign Management Institute, all enrollees are expected to attend every class session and submit the group campaign plan at the end of the course.**

American University

Visiting Student Enrollment/Registration Form

Name (First, Middle Initial, Last):			
Home Street Address and Apt. #	City	State	Zip Code
E-mail Address	Daytime Phone	Evening Phone	Country (if not USA)
Visa Type: <input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> F1 <input type="checkbox"/> G4 <input type="checkbox"/> H1 <input type="checkbox"/> J1 Institution:		Citizenship:	
Date of Birth (MM/DD/YY)	<input type="checkbox"/> Male <input type="checkbox"/> Female	Social Security:	

Course Registration					
List course(s) for which you wish to register (see http://www.american.edu/provost/registrar/schedule/) for course information you list below).					
Subject Code	Course Number	Section Number	Credit Value	Grade Type	Course Title
				<input type="checkbox"/> A-F <input type="checkbox"/> P/F <input type="checkbox"/> No Credit	
				<input type="checkbox"/> A-F <input type="checkbox"/> P/F <input type="checkbox"/> No Credit	
				<input type="checkbox"/> A-F <input type="checkbox"/> P/F <input type="checkbox"/> No Credit	
				<input type="checkbox"/> A-F <input type="checkbox"/> P/F <input type="checkbox"/> No Credit	

I agree to assume academic and financial responsibility for each course for which I register. I understand that course withdrawal and tuition cancellation are governed by policies and dates published by the American University Academic Calendar : (<http://www.american.edu/provost/registrar/schedule/academic-calendar.cfm>)

Student Signature _____ **Date** _____

Office Use Only

Registration Authorization: _____ **Date** _____