

Indiana University Kokomo

University ID number: _____

Personal Information Update Form/Registration Authorization Form (RAF)

 Last Name First Middle (NAME CHANGE-SEE REVERSE) Former Name

 Male Female Birth Date (Month/Day/Year) Social Security Number (optional, but required for financial aid)

 Street Address City State Zip Code County (Indiana residents only)

 Home Phone Work Phone E-mail Address

What is your citizenship status? U.S. Citizen Non-U.S. Citizen, Country of Citizenship? _____
 (documentation may be required) Student Visa, Non-U.S. Citizen Permanent Resident/holder of Green Card (must supply a copy)

1. What is your intended major at IU? _____

2. Have you previously attended any college, university, or other postsecondary institution? (Attendance at any IU campus including Kokomo constitutes "Yes".) Yes No

List colleges, universities, dates of attendance, and degrees received.
 Name of College Dates of Attendance Degree Earned

3. Are you currently enrolled at another institution? Yes No

If yes, please list courses you are currently or plan to enroll in:

4. What semester do you plan to attend IU Kokomo Semester _____ Year _____

5. Residence (See reverse for explanation)

 What is your state of legal residence? How long in the immediate past have you lived in that state? Year(s)

6. Have you been convicted of a felony or have you engaged in behavior that resulted in injury to a person(s) or personal property¹? Yes No

I certify that the information submitted in this application is correct to the best of my knowledge and understand that submitting inaccurate and false information may result in denial of admission and/or termination of enrollment at Indiana University.

 Signature of Applicant/Student Date

¹Criminal Activity Disclosure: Indiana University is committed to maintaining a safe environment for all members of the university community. As part of this commitment, Indiana University requires all applicants who have been convicted of a felony or who have engaged in behavior that results in injury to person(s) or personal property to disclose this information as a mandatory step in the application process. A previous conviction or previous conduct does not automatically bar admission to Indiana University, but does require review. Complete information must be sent to the IU Kokomo Office of Admissions at 2300 N Washington Street, Kokomo, IN 46904-9003.

Submit completed form to Indiana University Kokomo, Office of Admissions, 2300 S Washington Street, P.O. Box 9003, Kokomo, Indiana 46904-9003, (765) 455-9217 or toll-free (888) 875-4IUK, www.iuk.edu.

FOR ACADEMIC USE ONLY:		Term _____	Anticipated Grad Date _____
<i>Advisor: please complete ALL info inside this box</i>			
SERVICE INDICATOR		ACADEMIC OBJECTIVE	
Temporary Clearance	Yes / No	Program	
If yes, SI code		Plan	
		Requirement term for program	

 Advisor Signature

 ADM _____ REG _____

Revised 3/13/07

CHANGE OF NAME:

The Office of the Registrar maintains the official name and address for all students. Students whose names have been legally changed or require editing should file an Application for Change of Name form (available in the Office of the Registrar). ***Legal documentation, such as a driver's license or social security card with your new name, or a copy of your marriage certificate, divorce decree, or other official court document, must be viewed by a staff member in the Office of the Registrar to support the name change.***

RESIDENCY:

A person shall be classified as a "resident student" if he or she has continuously resided in Indiana for at least twelve (12) consecutive months immediately preceding the first scheduled day of classes of the semester or other session in which the individual registers in the University. For the full policy, stop by The Office of the Registrar or visit our webpage at <http://www.iuk.edu/~koregstr/residency.shtml> .