**OFFICE OF THE REGISTRAR**  
Saint Vincent College  
Latrobe, Pennsylvania 15650-2690  
724-537-4559

**PRE-REGISTRATION FORM**

Please complete all sections.

- **EMPLOYER REIMBURSEMENT?**
  - [ ] YES
  - [ ] NO

- **EMPLOYER**
  
- **TUITION STATUS**
  
- **PAYMENT AMOUNT**
  - [ ] CASH
  - [ ] CHECK # ______
  - [ ] VISA
  - [ ] MASTERCARD

- **GRADUATE OF:**
  - [ ] SVC
  - [ ] OTHER 4-YEAR

- **NOTES:**
  
- **ID Number**

**Course No.**

<table>
<thead>
<tr>
<th>Course No. (e.g. BA 100)</th>
<th>Section No.</th>
<th>Title</th>
<th>Credit Hours</th>
<th>Days</th>
<th>Time</th>
<th>Instructor</th>
<th>Pass/Fail</th>
<th>Audit*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Please check one:**

- [ ] DIVORCED
- [ ] MARRIED
- [ ] SINGLE
- [ ] WIDOWED

**Please check one:**

- [ ] FEMALE
- [ ] MALE

**Are you Hispanic or Latino?**

- [ ] YES
- [ ] NO

Select one or more of the following to describe your race:

- [ ] American Indian or Alaska Native
- [ ] Asian
- [ ] Black or African American
- [ ] Native Hawaiian or Other Pacific Islander
- [ ] White

**ARE YOU A VETERAN?**

- [ ] YES
- [ ] NO

**DATE OF BIRTH**

**PLACE OF BIRTH**

**RELIGIOUS PREFERENCE**

(Please indicate denomination)

**I would like to explore a vocation to the religious life or priesthood.**

- [ ] YES
- [ ] NO

**Are you enrolling in (check one):**

- [ ] DEGREE
- [ ] HIGH SCHOOL CREDIT PROGRAM
- [ ] NON DEGREE
- [ ] POST-BACCALAUREATE
- [ ] PRE-COLLEGE

**HAVE YOU TAKEN COURSES AT SAINT VINCENT BEFORE?**

- [ ] YES
- [ ] NO

**IF SO, WHEN?**

**IF YOU ATTEND ANOTHER COLLEGE FULL TIME, WHAT IS ITS NAME?**

**SAINT VINCENT COLLEGE DOES NOT DISCRIMINATE AGAINST SEX, AGE, RACE, RELIGION OR CREED.**

**Total Hours**

* Enter a check (✓) in these columns if you wish to take the course for the Pass/Fail or Audit options.

**Student’s signature**

**Advisor’s signature**

N.B. Registration is not completed until the first week of classes when the student receives Financial Clearance and I.D. card validation.

**Date**

---

**VERI JUSTIQUE SCIENTIA VINDEX**

SAINT VINCENT COLLEGE • LATROBE • PENNSYLVANIA

---

**Signature**

---

**Signature**