

## **REGISTRATION FORM**

Graduate Programs Office 44 Cummington Mall Room 114, Boston, MA 02215 Phone: 617-353-9760 Email: Enggrad@bu.edu

This form should be used for new Boston University students to register in classes. Please fill in all fields below, including all demographic data to create a Boston University student record.

Student Information First and Last Name		BU ID #:					
Date of Birth:		 	Legal Sex: Female Male Legal, binary sex is required for BU records and Federal reporting.				
School or College: Prior BU Affiliation: Staff/Faculty Former Applicant							
Email: Cell Phone #:							
Local Address:(Street address, city, state, zip code, country where you reside while attending classes at BU)							
BU Alert Phone Number: Is this a Cell Phone: yes no (Required for notification of University-wide Emergency)							
Person to notify in case of emergency: Relation: Emergency Contact's Phone:							
Race/Ethnicity Information: Are you a US Citizen or Permanent Resident: ☐ yes ☐ no  If you answered yes, please check all that apply below. This information is for Federal reporting for US residents/Permanent Residents.  Are you Hispanic or Latino/a? ☐ yes ☐ no  Asian ☐ Black or African American ☐ Native Hawaiian or Pacific Islander  White ☐ Other ☐ Choose not to answer							
Registration Information: Fill in all the course information below.  Academic Semester: Academic Year:							
# College	Course Number	Section	Credit Hrs	Co	ourse Title		
Ex. CAS	CS 101	A1	4	Intro	to Computers		
Student Signature:  Signature: Date:							
Advisor Signature:							
Signature: Date:							

## Directory Information Restriction Use this form to manage public access to your data at Boston University

The Family Educational Rights and Privacy Act (FERPA) protects the privacy of your education records and restricts disclosure of personal information from your education records, except as authorized by law. For information on Boston University's FERPA policy, please refer to the Registrar's Office website at <a href="https://www.bu.edu/reg/ferpa/ferpa-policy">www.bu.edu/reg/ferpa/ferpa-ferpa-policy</a>.

The University has designated certain types of personally identifiable information as "Directory Information." A list of this information is below. Unless restricted, Boston University may disclose any of the items of Directory Information without your consent.

Boston University will not release grades or GPA information without your prior consent. In addition, Boston University does not provide student lists outside the University for purposes of marketing.

Any and all data that you restrict below will not be released outside the University.

Email: Enggrad@bu.edu

If you wish to restrict the release of your Directory Information, you may do so by using the Student Link, by completing the information below, or by visiting the Office of the University Registrar.

Name:
BU ID:
Check to restrict:
Local Address and BU Directory Phone Number: If restricted, this information will not be listed in the BU online directory nor printed in the BU phone book.
<b>Email Directory Lookup:</b> If restricted, your email address will not be listed in the BU on-line directory.
<b>School or College:</b> If restricted, this information will not be released to anyone outside BU.
Academic Program (Degree, Major, Minor): If restricted, this information will not be released to anyone outside BU.
Dates of Attendance, Full/Part-time Status: If restricted, this information will not be released to anyone outside BU, including insurance providers and employers.
Degrees, Honors, and Awards Received: If restricted, this information will not be released to anyone outside BU, including insurance providers and employers.
Commencement Program: If restricted, your name, college, degree and honors will not appear in the Commencement Program when you graduate.
<b>Bostonia Yearbook:</b> If restricted, your name will not appear in the BU Yearbook when you graduate.
Please return to:
Graduate Programs Office
44 Cummington Mall, Room 114
Boston, MA 02215
Phone: 617-353-39760

Please sign below to acknowledge that the information you have en information. This form must be accompanied by legal documents s	, , ,
Student Signature:	_Date: