



Continuing & Distance Education, St. Francis Xavier University
 P. O. Box 5000, Antigonish, NS B2G 2W5
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DIPLOMA IN INTELLECTUAL DISABILITY STUDIES

FALL TERM COURSE REGISTRATION

Return this form with payment to the address above. Cheques to be made payable to St F X University

StFX Student ID # _____

Complete all sections and please print clearly

Last Name	Full First Names

Date of Birth: (required only for identification in Registrar's records) (Day _____ Month _____ Year _____)

Address for receiving course material

Mail/Courier Address	Town and Province	Postal Code
Home Phone # Work Phone # Cell Phone #	Personal E-Mail Address (print clearly) (Access details for discussions/course resources will be emailed to personal email approximately four days before term begins).	
Do you require a receipt* for tuition paid? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Please indicate your choice for this term: <input type="checkbox"/> INDS 110 Foundations of Disability and Caregiving <input type="checkbox"/> INDS 130 Human Development	OFFICE USE: Tuition Payment _____ Date received _____	

Date: _____ **Signature of Applicant:** _____

Tuition is \$500 (subject to change at the discretion of the University). Cheques/money orders must be made payable to St. F. X. University and mailed to the Program Office at the address above. Participants outside of Canada should contact the program office for current fees and Bank Transfer details.

* Official receipts for tax purposes are issued by the Business Office at the end of February for courses taken the previous year.

Office use only			
<input type="checkbox"/> Acknowledgement of registration emailed (Day _____ Month _____ Year _____)			
<input type="checkbox"/> Requested receipt issued (Day _____ Month _____ Year _____)			
<input type="checkbox"/> Campus Store instructions emailed (Day _____ Month _____ Year _____)			
<input type="checkbox"/> Blackboard access emailed to participant (Day _____ Month _____ Year _____)			