





REGISTRATION FORM Felician Higher Education Online Alliance

Felician University: Office of the Registrar • 1 Felician Way, Rutherford, NJ 07070 • (201)559-6038 • registrar@felician.edu Madonna University: Office of the Registrar • 36600 Schoolcraft Road, Livonia, MI 48150 • (734)432-5400 • registrar@madonna.edu Villa Maria College: Office of the Registrar • 240 Pine Ridge Road, Buffalo, NY 14225 • (716)961-1806 • shieldsm@villa.edu

DATE	SEMESTER/YEAR	SOCIAL SEC	URITY #	ID NUMBER			
HOME INSTITUTION	:	HOST INSTIT	UTION:				
LAST NAME		FIRST		MIDDLE			
ADDRESS							
		BIRTH DATE					
PHONE: HOME		CELL					
HOME SCHOOL EMAIL							
Religious Affiliation:	Citizenship: _		First	Language:			
Non-Resident Alien (check one): Yes (if yes, stop here)							
Race (check one or more): White Black/African Am. Asian Am. Indian/Alaskan Native Native Hawaiian/other Pacific Islander 							
HOST COURSE NUMBER	SHORT TITLE		SEMESTER HOURS	HOME COURSE EQUIVALENCY			

, 0 0 0	agreement, you agree to the tuition charge	,				
institution provide a copy of your transcript, at no charge, to your Home Institution Registrar. I understand that an						
electronic signature has the	he same legal effect & can be enforced in t	he same way	y as a writte	en signature. Electronic		
Signatures Act, 15 U.S.C. S	S 7001					

 Student Signature
 Date

 Office Use