

Name:	Student ID:
Street Address:	
City:	State:
Zip Code:	Country:
Email:	Phone:
Current Student Status:	Non-Degree Degree (admitted to CU degree program)
If Degree Student, campus adm	nitted into: 🔲 Boulder 🔲 Denver 🔲 Colorado Springs
Current Academic Prog	gram:
Department:	
Beginning Term: 🔲 Fall 🔲	Spring Summer? Year: 20 Course You Plan to Take:
Will you be taking the courses o	on the Boulder campus or via distance learning (Boulder Connect)?
🔲 On Carr	npus Distance Learning (Boulder Connect)
For Non-Degree Student Only	
	vas Received:
Graduation Date:	
Work Experience:	
Work Experience:	
	Date:

to ceaegrad.advising@colorado.edu.