

RAMAPO
COLLEGE
OF NEW JERSEY

ALUMNI/FRIENDS PLUS PROGRAM COURSE REGISTRATION FORM

Complete this form and submit it with your Course Selection Form Below*

Please check one: Friend of Ramapo Alumnus/a Class Year(s):

Name (Last, First, M.I.):

Address:

Apt/Box:

City:

State:

Zip:

Mobile Phone:

Home Phone:

Email Address:

Date of Birth:

(Registrant Signature)

(Foundation Signature)

Course Selection Form

COMPLETE THIS FORM AND SUBMIT IT WITH YOUR REGISTRATION FORM ABOVE*

Semester

Year

CRN #	Subject # Course #	Title	1 st Choice or Backup
Example: 40076	PSYC 101	Intro to Psychology	1 st Choice
			1 st Choice
			2 nd Choice
			3 rd Choice

To access the course list click here: <https://myssb.ramapo.edu/StudentRegistrationSsb/ssb/term/termSelection?mode=search>

*Email the two forms to: alumni@ramapo.edu (Friends of Ramapo can use this address also).

All books and fees are the responsibility of the registrant. This form can only be used during the time specified for Friends & Alumni registration. Registration is on a space available basis.

I understand that I am registering to audit this course and no grade will be issued for this course. Tuition is waived but I am responsible for any fees charged and the purchase of any necessary books and/or supplies.

Currently enrolled students are not eligible for membership in the Friends of Ramapo.

Membership in the Friends of Ramapo is a privilege and it may be withdrawn for violations of College policies or procedures.

Emailing this form to the Ramapo College Foundation/Office of Registrar indicates I accept these terms.