



Student's Last Name _____

Please Print

REGISTRATION/ADD/DROP FORM

First Name _____

Please Print

SEMESTER _____

Student's ID# 70 _____

Level: (circle one) UG GR CL LW

COURSES I WISH TO ADD

CRN	DEPARTMENT	COURSE	SECTION	DAYS	HOURS	#CREDITS
					TOTALCREDITS	

COURSES I WISH TO DROP

CRN	DEPARTMENT	COURSE	SECTION	DAYS	HOURS	#CREDITS
					TOTALCREDITS	

REVISED CREDIT LOAD: _____

Adviser's Signature (If required) _____

Print Adviser's Name _____

Student's Signature **NOTE: Student must initial below and sign page 2 as well**

_____ Date

Acknowledgement of Financial Responsibility

This Acknowledgement will apply to the student's financial obligations to Hofstra University for each term of enrollment.

By signing the above, I am certifying that it is my intent to sign this Acknowledgement, that I am submitting this Acknowledgment to Hofstra University, and that I have read, understand, and agree to the terms and conditions of this Acknowledgement. I am submitting this document in order to officially register for classes. I understand and agree to the following:

General Provisions:

- I am fully responsible for all charges incurred as a result of registration for classes, enrollment in or cancellation of housing and meal plan agreements, and associated fees, interest, and late charges, as published in the University bulletin and/or on the University website, as well as any fines imposed by the University for Violation of its policies.
- All tuition, fees, and other charges must be paid in full by the date established by the University for each semester, or by the date set in an approved payment plan, and if payment is not received or deferred by the due date, I will be assessed late fees which are my responsibility to pay.
- If I decide not to attend the University, I am responsible for **formally** dropping or withdrawing from classes. **Nonattendance of classes is not considered an official withdrawal, and does not relieve me of my financial obligation or entitle me to a refund.**
- **If I withdraw after the start of the semester, I may be responsible for charges in accordance with the University's Refund Policy.**
- If I am suspended or expelled from the University, all tuition and fees are forfeited, and I am responsible for paying all unpaid tuition and fees.
- This agreement will be in effect until I have fulfilled all financial obligations to the University.
- I am responsible for maintaining my current name, address, phone number and social security number with the Office of Academic Records.
- Hofstra University's main source of communication is through the Hofstra pride email account provided to me. I am responsible to check this email account for notices regarding my account at Hofstra
- I am responsible for reviewing, understanding, and abiding by the University's policies, procedures, and deadlines, as described in all official University publications, including but not limited to the University bulletin and the University website.
- I authorize the University and its agents and contractors to contact me regarding my student account or any other aspect of my attendance at the University at the current or any future number that I provide for my cellular phone, home phone or other wireless device using automated telephone dialing equipment or artificial or pre-recorded voice or text message.
- Full-Time School of Law Students Only: I have read and agree to abide by Hofstra Law's academic regulations, which prohibit full-time students from working more than 20 hours per week, in accordance with the American Bar Association's Accreditation Standards for Law Schools.

Payments and Financial Aid

- If payment is made by paper or electronic check and the check is returned for any reason, I understand that a returned check fee will be charged to my student account at the published rate.
- I will apply monies received from Financial Aid sources (including, but not limited to, Direct Loans, Perkins Loans, alternative loans, scholarships and/or grants) to pay for the charges on my student account, in accordance with the terms and conditions of the Financial Aid.
- If I expect financial aid to pay all or part of my financial obligations to the University, I understand that it is my responsibility to meet all requirements for disbursement to my student account. In the event that financial aid is reduced or cancelled, or if I have not met the specified requirements for receiving such aid, I will become responsible for the full balance of outstanding charges on my student account.
- Dropping or withdrawing from classes may result in a loss of financial aid for the current and/or future terms and I am responsible to reimburse Hofstra for any portion of a refund that I received based on financial aid funds for which I later lose eligibility due to nonattendance, dropping or withdrawing from classes.

Failure to Make Payment By the Due Date Shall Result in the Following:

If I fail to pay the full balance due by the due date, Hofstra University may exercise any remedy allowed by law, including one or more of the following:

- 1) The University may bar me from further enrollment, graduation and receipt of transcripts and diplomas until the balance is paid in full.
- 2) Interest in the amount of 1% per month may be added to unpaid balances after the term ends.
- 3) My account may be assigned to a collection agency or law firm. I will be responsible for all costs and expenses associated with the collection of unpaid amounts, including the fees of any collections agency, which may be based on a percentage of the total balance due (up to a maximum of 45 % of the total balance due) and reasonable attorney's fees.

Student's Signature

Date

____70_____
Hofstra ID Number