## Fall 2023 Registration Form Fax to Student Services at 870-864-7137 or email to advisor@southark.edu

| Name:   |  |   |   |  | Student I.D.  | # 777 <b>-</b> 0     |                 |            |  |
|---|--|---|---|--|---|----------------------|-----------------|------------|--|
| Las   | t Fi   | rst Mic                                       | idle  | Maiden   |   | · _ <u>· · · · ·</u> |                 |            |  |
| Current Address   | s:   |   |   |  |   |                      |                 |            |  |
| Street or Box   |  | City  |   | State  | Zip   |                      |                 |            |  |
| Phone #: En   |  | ail:  |   | Major:   |   |                      |                 |            |  |
| Contact Person  | ı In Case of                                   | Emergency:                                    |   |  |   |                      |                 |            |  |
| Name:   | Name:  |   |   | <b>#</b> :   | Rela  | ationship: _         |                 |            |  |
|   |  | e occasional text n<br>ell phone carrier.     | nessages ab   | out important ann  | ouncements and do                                       | ites, please j       | provide a valid | cell phone |  |
| Cell Phone:   |  |   |   | Carrier:   |   |                      |                 |            |  |
| Directory inform  | ation includes<br>ass schedule d               | s name, address, pho<br>and classification. T | one number, j   | place of birth, acader                                   | NO _<br>mic major, high schoo<br>d parties for the purp | l attended, no       |                 |            |  |
| ······  |  | FINANCIAI                                     |   |  | what, if any, applies                                   |                      |                 |            |  |
| Self Pay  |  |   | Payments are made in the Bookstore or payment plans are set up in MyCampus. Please contact the SouthArk Business Office for Payment Deadlines   |  |   |                      |                 |            |  |
| Pell Grant  | Pell Grant                                     |   |   | Must submit signed award letter to receive Financial Aid |   |                      |                 |            |  |
| Student Loan  |  |   | Must be enrolled in at least 6 hours  |  |   |                      |                 |            |  |
| El Dorado Promise   |  |   | Must successfully complete at least 12 hours each semester, 24 credit hours per Academic Year   |  |   |                      |                 |            |  |
| Academic Challenge (Lottery Scholarship)  Veteran/Veteran dependent (VA benefits) |  |   | Must successfully complete 12 hours first semester, 15 hrs. each following sem. (27 hrs. first academic year, 30 each following year)   |  |   |                      |                 |            |  |
| Veteran/V   | eteran depend                                  | ent (VA benefits)                             | year, 30 each following year)  After registering, submit a copy of bill to VA Rep. in Financial Aid Office (can be printed in Business Office, 2 <sup>nd</sup> floor Administration building) |  |   |                      |                 |            |  |
| Institutional/Community Scholarships  |  |   | Must adhere to all scholarship guidelines, see website for details  |  |   |                      |                 |            |  |
|   | <u>,                                      </u> |   |   |  |   |                      |                 |            |  |
| Course Number   | se Number Section Course Title                 |   |   |  |   | Day(s)               | Start Time      | End Time   |  |
| ASC 0103  |  |   |   |  |   |                      |                 |            |  |
| ASC 1101  | 090  | Campus Technology                             |   |  |   |                      |                 |            |  |
|   |  |   |   |  |   |                      |                 |            |  |
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| <i></i>   |  |   |   |  |   |                      |                 |            |  |
|   |  |   |   |  |   |                      |                 |            |  |
| otal credit ho  | urs for sen                                    | nester:                                       |   |  |   |                      | <u>k</u>        | <u> </u>   |  |
|   |  |   |   |  |   |                      |                 |            |  |
|   |  | <b></b>                                       |   |  | ule Approved by: _                                      | A 1. '               |                 |            |  |
| Stude   | ent's Signa                                    | iture   | L   | Oate   |   | Adv1so               | r's Signature   |            |  |