

Bowdoin College

Enrollment/Registration Form for Teaching Fellows

This form serves to notify the College officially that you are on campus and attending classes.
 This form **MUST** be returned to the Office of the Registrar in order to complete the course registration process.

Today's Date _____ Bowdoin ID _____

Teaching Fellow's Full Name _____

Birthdate _____ Email _____

Local Address _____

City/State/Zip _____

Billing Address _____

City/State/Zip _____

Cell Phone _____ Local Phone _____



Bowdoin Department _____

Hispanic or Latino? Yes No Please check all that apply: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Single <input type="checkbox"/> Married	Please select one: <input type="checkbox"/> United States (US) Citizen <input type="checkbox"/> Dual Citizen, US & Other Country <input type="checkbox"/> Non-US Citizen <input type="checkbox"/> Legal Permanent Resident Non-US Countries of Citizenship: _____ _____ Social Security # _____
--	---








 	
Name _____	
Relationship _____	
Address _____	
City/State/Zip _____	
Cell Phone _____ Other Phone _____	

Bowdoin College

Enrollment/Registration Form for Teaching Fellows

This form serves to notify the College officially that you are on campus and attending classes.