



INSTITUTE OF BUDDHIST STUDIES

2140 DURANT AVENUE, BERKELEY, CA 94704-1589
TELEPHONE 510.809.1444 FACSIMILE 510.809.1443

REGISTRATION FORM 2010-2011

Student's Name: _____

Address: _____

Telephone: _____ E-mail Address: _____

May we include your address, phone number & email in a directory for use by other IBS students, faculty, staff, etc.?

Please check your preference: telephone no.: YES NO address: YES NO e-mail: YES NO

Emergency Contact: _____ Tel: _____

Program (circle one): GTU/IBS MA MBS MDiv
Certificate of Buddhism and Contemporary Psychology Certificate of Shin Ministry

Semester: FALL SPRING Year _____

	Course Number	Course Title	Instructor	Units
1.				
2.				
3.				
4.				
5.				

Check one of the following: (refer to catalog for a complete list of fees)

- Degree Program:** \$7,000/semester + \$100 reg. fee or prorated per course
- Continuing Student:** \$3,500/semester + \$100 reg. fee
(after two years of full-time or equivalent enrollment)
- Certificate Program:** \$1,750.00/3 unit course + \$100 reg. fee
- Special Student:** \$3,200/3 unit course + \$100 reg. fee
(NOTE: Verification of credit transferability is the Student's responsibility)
- Auditor w/ Record:** \$1,750/per course + \$100 reg. fee
- Auditor:** \$750/per course + \$100 registration fee
- Senior Auditor:** 50% of Auditor fee + \$100 reg. fee
- Leave of Absence:** \$100 + \$100 reg. fee
- Late Registration Fee:** \$100
- Transcript:** \$5

Office Use Only

Tuition fee due: _____
+Reg. fee (non-refundable): \$100
+HIPS (or waiver): _____
+STRF: _____
+Late fee (\$100): _____
Total amount due: _____
Check date: _____
Check number: _____
Balance due: _____

Student's Signature: _____ Date: _____

Degree and Certificate Academic Advisor: _____ Date: _____

Business Office: _____ Date: _____

Any change of course program requires academic advisor's re-approval