THE UNIVERSITY OF TEXAS AT AUSTIN

K-16 Education Center
Continuing & Innovative Education

FORM AVAILABLE ONLINE
www.utk16.org/form/course

HIGH SCHOOL COURSE ENROLLMENT FORM

Complete the fields below and then submit the form using the information listed at the bottom of the page.

PERSONAL INFORMATION (Please print in ink.)

		☐ Male ☐ Female
UT EID (Skip if unknown.)	Birth Date	Check One

Name:

Last	First	M.I.

Address:

Street		Apt. #
City	State	ZIP

Phone: ( ) ( )
Primary Secondary

E-mail:

PAYMENT

☐ **Money Order**
(Attach. Payable to: The University of Texas at Austin.)

☐ **Check #:**
(Attach. Payable to: The University of Texas at Austin.)

☐ **Credit Card:**

☐ VISA ☐ MasterCard
☐ Discover ☐ American Express

Number Exp. Date

Cardholder's Name (Print.)

COURSES (*Course abbreviation, title, cost and description are available on our Web site: www.utk16.org.)

Course Abbreviation*	Course Title*	Course Cost*
SAMPLE: HLT 1	HEALTH 1	$189.00
	International Students Only*: **$30.00 Mail Fee** (*See our catalog or Web site for details.) ▸	
	Total ▸	

SCHOOL INFORMATION

Are you currently attending high school? ☐ Home School ☐ Public or Private School (Complete the following.) ☐ UT Online High School ☐ No

School Name:

Grade Level:

School Address:

Street

City State ZIP

School Phone: ( )

E-mail:

OFFICIAL SCHOOL NOTIFICATION

The K-16 Education Center will no longer call the school for course approvals. It is the applicant's responsibility to receive prior approval before registering for distance courses.

STUDENT TERMS OF AGREEMENT (Required.)

Submission of this form constitutes a binding agreement; however, within 30 days of enrollment the student may drop the course and receive a partial refund or transfer to another course for an additional fee. **Initial Here** ▸

SUBMISSION AND CONTACT INFORMATION

Address:
K-16 Education Center
P.O. Box 7700
Austin, TX 78713-7700

Fax:
(512) 475-7933

Web site:
www.utk16.org

Phone:
(888) 232-4723
(512) 232-5000

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