Institutional Document



University of Sioux Falls ON CAMPUS GRADUATE ENROLLMENT

Three easy ways to register!

Complete this form and mail to:

University of Sioux Falls Attn: Workshops 1101 West 22nd St.

Complete this form and fax to: 605-331-6869

(must use credit card if registering by fax)

Call:

(605) 331-6650

(must have credit card to register)

Siou	ıx Falls, SD 5710	<u> </u>			
		C	ONTACT INFORMATION		
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Last Name		_	First Name		
Maiden Name		_	Social Security Number or USF ID		
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Address			City	State	Zip
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E-Mail Address					
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