Please read the following instructions carefully and be sure to keep this form after turning in your application. Please also note that your priority registration will not be in effect until your second quarter at UCSB.

A. You only have to apply **ONCE** and all other quarters will be adjusted accordingly.

B. Attach all required documents.
   1. Copy of birth certificate and we will make a copy.
   2. Copy of current GOLD schedule.
   3. Copy of custody agreement (if applicable).
   4. Statement of Need no more than half a page.

C. Please bring your application and all required documents to the NTSRC, room 1109 in the Student Resource Building.
   **NOTE:** If you do not turn in your application by the due date, your priority for registration will be held until the following quarter’s passing time.

D. To find out if your application was processed:
   1. Call the Office of the Registrar and ask if your name is on the list of students who have priority for registration.
   2. Wait until you receive an email from GOLD about your pass time availability for the following quarter.
   3. Check on GOLD to see when your dates to register for classes are and you should see early dates reflected.

**Important Note:** Be aware that if you do not turn in your application on time, priority registration will be delayed until the following quarter.

**Fall 2020 Due Date: Friday, October 8, 2021**
UCSB Student Parent Application for Priority Registration

By filling out this application you are requesting priority when registering for your classes at UCSB. Priority registration is a special benefit provided to eligible students who have a dependent child/children living with them at least 50% of the time. If this application is approved, you will be placed on a priority registration list for the remainder of your time at UCSB (assuming consistent enrollment). Once your application is approved, your priority registration will take effect the following quarter. If your dependent status changes, please notify Non-traditional Student Services at (805) 893-5869 or NTSRC@sa.ucsb.edu

Name ____________________________________________    Perm # _________________

Last   First   Middle

Local Address ________________________________________________________________  City Zip Code

E-mail address ____________________________________  Phone # _________________

Name(s) of child(ren) _________________________________________________________

Expected Date of Graduation:____________

The staff of Non-traditional Student Services will certify that you are eligible for priority registration based on documentation received.

In addition to filling out the request above you must provide the following:

1. Copy of the dependent’s birth certificate (if you are not listed on the birth certificate you must attach verification of your custodial or guardian status.)
2. Copy of current GOLD schedule.
3. Copy of a custody agreement, if applicable.
4. "Statement of need" describing why you need to have priority when registering for classes.

I certify that I have _______ (number) of children under 18 living with me and who are dependent on me at least 50% of the time. I understand that priority registration is a privilege and hereby certify that all information contained in this application is correct as of the date written below.

Signed: ____________________________________________    Date: _________________