

DICKINSON COLLEGE
REGISTRAR'S OFFICE
Graduate Course Registration Form
P.O. Box 1773
Carlisle PA 17013-2896

All fields are **required** unless designated otherwise. Please submit an official transcript showing completion of a bachelor's degree to the above address.

Full Legal Name: _____
Last, First Preferred First

Address: _____
Street

City State Zip Code

Email Address: _____

Phone Number: _____

Citizenship: US Other: _____

Gender: Female Male

Date of Birth: _____

Ethnicity (optional):

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic
- Native Hawaiian or other Pacific Islander
- White or Caucasian
- Multi-ethnic
- Other

Institution currently attending or completed: _____

Spring Term Course Registration:

First Block – March 25 – April 29, 2021

MGCD 840 - Public Health and Disasters

Second Block – April 28 – June 2, 2021

MGCD 830 - Psychosocial Dimensions of Disaster

MGCD 853 - Theory and Practice in Humanitarian Response and Human Rights Protection

MGCD 851 - Influence Operations in the Age of Networks

Signature: _____

Date: _____