

Non-credit Lifelong Learning Registration Form

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STUDENT IDENTIFICATION NUMBER

Social Security Number (required)

Phone (Home) _____

Print Name _____

(Work) _____

Street Address _____

(Cell) _____

City/State/Zip _____

New address and/or phone # New student

Email Address _____

Maiden Name (if applicable) _____

Citizenship (required) Are you a United States citizen? Yes No

Date of Birth (required) _____ Gender Male Female

If not, are you a permanent resident (*green card holder*)? Yes No

Payment Information:

• Credit Card MC Visa Discover

Name on Credit Card _____

Card Number _____

Expiration Date (required) _____ Security Code _____

• Check Cash Tuition Authorization Letter

Please provide the following race and ethnic data. This information is requested on a VOLUNTARY basis by the U.S. Department of Education, National Center for Education Statistics. Your answer will not affect your registration or admission to the college.

Ethnicity: Hispanic/Latino Non-Hispanic/Non-Latino Prefer not to answer

What is your race? Choose one or more:

White (10) Black or African American (20)

Asian (45) American Indian or Alaskan Native (50)

Native Hawaiian or Other Pacific Islander (80)

Other (90) Choose not to respond (60)

CRN	COURSE TITLE	COST	DATES	DAYS (circle)	TIME	ROOM
				M T W R F S S		
				M T W R F S S		
				M T W R F S S		
TOTAL COST:		<input type="text"/>				

Withdrawal and refund requests must be received THREE business days PRIOR (72 hours) to the beginning of class unless stated otherwise in the course description.