



Workforce & Economic Development Registration Form

SSN# or Colleague ID _____

Last Name _____

First Name _____ MI _____

Address _____

City, State, Zip _____

County of Residence _____

Phone H _____ W _____

Date of Birth _____

Last High School Attended _____

City & State of Last High School _____

Last Date Attended High School ____/____/____
Month Day Year

Race White African American American Indian
 Hispanic Asian Other/Unknown

Sex Male Female

If course is Emergency Service, Name of Police, Fire, or Rescue Dept. _____ Paid Volunteer

Employer _____

Employment Status Full-Time Part-Time (_____ hours per week)

Retired Unemployed - Not seeking Unemployed - Seeking

Highest Educational Level

Non-Graduate (Highest grade completed) _____

GED High School Graduate Adult High School Diploma

1-year Vocational Diploma Associate Degree

Bachelor's Degree Master's Degree or Higher

Head of Household Yes No

Disadvantaged: Academically Economically

Limited English Yes No

Single Parent Yes No

Citizenship US Citizen E Eligible Legalized/Resident Alien

A Non-Resident Alien

Is this an On-Line Course? Yes No

Have you enrolled in this class more than once? Yes No

Senior (65+) HRD Other _____

Email: _____

How did you hear about this class? _____

Student Signature _____

Date _____

Course Registration Information

Course #	Section #	Course Title	Course Dates/Time	Fee

Cash Check Money Order Visa Master Card Card Holder's Name

Credit Card #

Security Code

Card Holder's Billing Address & Zip

Expiration Date

Registration Fee

Add'l Fee Amount

Total Paid

Card Holder Signature _____