

STUDENT REGISTRATION FORM

Workforce & Continuing Education Division P.O. 1248 · Ahoskie, NC 27910

Phone: (252) 862-1200 · ConEd Department: (252) 862-1202 · Public Safety Department: (252) 862-1266 www.roanokechowan.edu/continuing-education

R-CCC STAFF ONLY
Entered By
Date
Colleague #
ID Copied
Grad Verified
Registered

TO ENROLL IN CONTINUING EDUCATION COURSES, YOU MUST BE 18 YEARS OF AGE OR OLDER. If you are under age 18, then you must have a Minor Release Form signed by your High School Principal or his/her designated representative in order to be eligible to enroll in Continuing Education courses. (This form may be obtained from our office. All students must provide a copy of their valid ID (Driver's License, ID, etc.) and proof of high school graduation if applicable.

nstructions: T	ype or print legibly ir	ink. Respond to all questions comple	etely. Return c	ompleted form and red	quired document	s to the Registrar's Office.
Name	Last	First	Mida	lle/Maiden	Course N	ame
Address				Stat	e	Zip
County		County of Residence		State	of Residence _	
Country		U.S. Citizen: Yes	No Email			
Home Phone	()	Work Phone()	c	ell Phone()
Social Securi	ty Number	Date	of Birth:		Gender:	Male Female
Ethnicity:		Race:				
Hispanic/	Latino	Asian		Black or African A	merican	White
Not Hispa	nic/Latino	American Indian or A	laska Native	Native Hawaiian	or Other Pacific Is	lander
How did you	hear about this cour	se? Please check only one.				
Advertise	ment Corporat	e Contact Personal Initiative	Recruitm	ent Activities Re	eferral Othe	er
Check one of	the following gradu	ation types:				
High Scho	ool Graduate	High School Equivalency Cor	mpletion	Current Dual Enrol	Iment/CCP Stude	ent
Did not g	raduate High School	Adult High School Graduate				
Name of Higl	n School attended o	· High School Equivalency received	from:		Year F	eceived:
Student Type	:					
Not appli		Rescue/EMS/Law Enforcement	Dual Enrol	lment/CCP		
Employment	Status: Please check	one.				
Retired		Employed 1-10 hours p	oer week	Employed 40 or m	nore hours per we	eek
Unemplo	yed-Not Seeking Emp	= ' '		Employer	-	
Unemploy	yed-Seeking Employm	ent Employed 21-39 hours	per week	Address		
Highest educ	ational level comple	ted: Please check one.				
1 2 7 8	3 4 9 10	5	-	One Year Vocat Associate Degi	tional Diploma ree	Bachelor's Degree Master's Degree or Higher
Is your tuition	n being paid by an ag	ency/organization? If yes, please sp	ecify			
Are you takin	g this course for cert	ification? Yes No		(Copy of authorizat	ion to pay must b	<mark>e on file or attached</mark>)
	ete the following if it ease my grades to:	applies to you: I hereby give permi	ssion to Roar	oke-Chowan Commu	nity College and	the NC Community College
NC Depai	rtment of Insurance F	re/Rescue Commission Em	ployer	Other		
	nal Justice's Training & C Sheriff's Commissio		ential Employ	er		
		s old or older or have included a Minc	or			
Release Form,	and that the above in	formation is correct.		Signat	ure	Date

^{*} Programs at R-CCC that prepare students for professional licensure(s)/certification(s) are designed to prepare a student to apply for applicable licensure/certification in North Carolina. In order to ensure whether the program meets requirements for professional licensure(s)/certification(s) outside North Carolina, R-CCC recommends the student contact the Dean of Workforce & Continuing Education or Program Coordinator prior to enrolling in the course.