Community Colleges of Spokane

CCS Continuing Education
NONCREDIT REGISTRATION FORM

PLEASE TYPE OR PRINT WITH A BALL POINT PEN.

Date_____ Previous last name_____

Name_____
Last First Middle

Address_____

City_____ State_____ ZIP_____

Day phone_____ Evening phone_____

E-mail address_____

Student's signature_____

STUDENT IDENTIFICATION NUMBER

SOCIAL SECURITY NUMBER

To comply with federal laws, we are required to ask for your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). We will use your SSN/ITIN to report Hope Scholarship/Life Time tax credit; to administer state/federal financial aid; to verify enrollment, degree and academic transcript records; and to conduct institutional research. If you do not submit your SSN/ITIN, you will not be denied access to the college; however, you may be subject to civil penalties (refer to Internal Revenue Service Treasury Regulation 1.6050S-1(e)(4) for more information). Pursuant to state law (RCW 28B.10.042) and federal law (Family Educational Rights and Privacy Act), the college will protect your SSN from unauthorized use and/or disclosure. If you refuse to provide your SSN, please write "REFUSED" in the SSN boxes above. Contact the CCS Business office at (509)434-5275 with questions.

U.S. CITIZEN? ❒Yes ❒No

❒Female ❒Male **BIRTH DATE** MO. DAY YR.

WHAT RACE/ETHNICITY DO YOU CONSIDER YOURSELF TO BE?

❒ African American (872)
❒ Alaskan Native (015)
❒ American Indian (597)
❒ Chinese (605)
❒ Filipino (608)
❒ Japanese (611)
❒ Korean (612)
❒ Native Hawaiian (653)
❒ Vietnamese (619)
❒ White (800)
❒ Other Asian (621)
❒ Other Pacific Islander (681)
❒ Other race (799) (please specify) _____

Are you of Spanish/Hispanic/Latino ethnicity?

❒ No
❒ Yes: Mexican, Mexican American, Chicano (722)
❒ Yes: Puerto Rican (727)
❒ Yes: Cuban (709)
❒ Yes: Other Spanish/Hispanic/Latino (717) (please specify) _____

ITEM	CLASS DATE	COURSE TITLE	LOCATION	FEE

NOTE: Car information and parking fee required for on-campus classes that meet **10 times or more**.

Will you be parking on campus? ❒ Fall, winter or spring ($12) ❒ Summer ($4) ❒ No

License plate number_____ State_____

Parking Fee (if required)

TOTAL $

See www.ccs.spokane.edu/NoncreditRefunds for withdrawal and refund information.

WASHINGTON STATE RESIDENCY STATUS

1. a. Have you been a legal resident* of Washington and lived continuously in Washington for the last 12 months? ❒Yes ❒No
   *A student cannot qualify as a legal resident of Washington for tuition calculation purposes if he/she possesses a valid out-of-state driver's license, vehicle registration or other documents that give evidence of being a legal resident in another state.
   b. If no, how long have you lived continuously in the state of Washington? _____Months
2. Were you claimed for federal income tax purposes by your mother, your father or your legal guardian in the current year? ❒Yes ❒No
   In the past calendar year? ❒Yes ❒No
   If YES, has your mother, father or legal guardian lived continuously in the state of Washington for the past 12 months? ❒Yes ❒No
3. Will you be attending college with financial aid provided by a public or private nonfederal agency or institution outside of Washington where state residency is a requirement for receiving that aid? ❒Yes ❒No
4. Are you active duty military, stationed in Washington? ❒Yes ❒No
   Are you the spouse or dependent of an active duty military person stationed in Washington? ❒Yes ❒No

PREVIOUS EDUCATION

Name of last high school attended_____ City_____ State_____

Date you **graduated** or will graduate: Month_____ Year_____ If you did not graduate, indicate highest grade completed _____

Have you successfully completed the GED test? ❒Yes ❒No

STUDENT STATUS

Select only one best response for each question and circle numbers below

How long do you plan to attend this college?
11 One Quarter
12 Two quarters
13 One year
14 Up to two years, no degree planned
15 Long enough to complete a degree
16 I don't know
90 Other

What will be your work status while attending college?
11 Full-time homemaker
12 Full-time employment (includes self-employment and military)
13 Part-time off campus
14 Part-time on campus
15 Not employed, but seeking employment
16 Not employed, not seeking employment
90 Other

What is your prior level of education?
10 Less than 9th grade
11 Less than high school graduation
12 GED
13 High school graduate
14 Some post high school, but no degree or certificate
15 Certificate (less than 2 years)
16 Associate degree
17 Bachelor's degree or higher
90 Other

What is your current family status?
11 Single parent with children or other dependents in your care
12 Couple with children or other dependents in your care
13 Without children or other dependents in your care
90 Other

What is your main long-term goal for attending this community college?
11 Take courses related to current or future work
12 Transfer to a four-year institution
13 High school diploma or GED
14 Explore career direction
15 Personal enrichment
90 Other

Do you have a physical or mental impairment that substantially limits one or more major life activities (i.e., seeing, hearing, speaking, walking, learning, working, or other)? ❒Yes ❒No *See www.ccs.spokane.edu/DSS or next page for more information.*

Make checks/money orders payable to Community Colleges of Spokane and mail to:

Institute for Extended Learning
Noncredit Registration MS 3027
2917 W Fort George Wright Dr
Spokane WA 99224-5202

Spokane Community College
Noncredit Registration MS 2151
1810 N Greene St
Spokane WA 99217-5399

Spokane Falls Community College
Noncredit Registration MS 3020
3410 W Fort George Wright Dr
Spokane WA 99224-5288

❒Check enclosed Charge my: ❒VISA ❒MasterCard Card holder's signature_____

Account number__ __ __ __-__ __ __ __-__ __ __ __-__ __ __ __ V-code***_____ Expiration date_____

Credit card information will be destroyed upon processing.