

REGISTRATION FORM



Use this form to complete a schedule change, late enrollment, audit, class overload, and over 18 credit requests.
Signatures required as indicated below.

TO BE COMPLETED BY THE STUDENT:

Quarter: Summer Fall Winter Spring Year: _____ SID #: _____

Last Name: _____ First Name: _____ MI _____ Male Female

Cell Phone #: _____ Other Phone #: _____ Birth Date: ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

LINE #	COURSE ID	# OF CREDITS	Please put an "X" in the appropriate box(es).						INSTRUCTOR/ADVISOR SIGNATURE
			ADD	DROP	AUDIT	LATE ENROLLMENT (INSTR APPROVAL)	OVERLOAD CAPACITY (INSTR APPROVAL)	OVER 18 CREDITS (ADVISOR APPROVAL)	

Financial Aid Disclaimer: I wish to make a change to my schedule as noted above and understand that making this change may affect my financial aid in adverse ways (ie: loss of future financial aid, owe money back to the College, etc). I further understand that I should speak with a Hawk Center Specialist prior to processing.

LIMITATION OF LIABILITY: The College's total liability for claims arising from a contractual relationship with the student in any way related to classes of programs shall be limited to tuition and expenses paid by the student to the college for those classes or programs. In no event shall the college be liable for any special indirect, incidental, or consequential damages, including buy not limited to, loss of earnings or profits.

Student Signature: _____ Date: _____

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Processor Signature: _____ Date: _____



- Gold Card (60 yrs and older)
 - Senior Fitness Only (55 to 59 yrs)
- Driver's License/ID Required*
- Community User - Fitness Center Only

Please complete the box below.

Please mark one or more boxes to indicate what race you consider yourself to be.

- White (800)
 - African American (870)
 - American Indian (597)
 - Alaskan Native (015)
 - Native Hawaiian (653)
 - Other Pacific Islander (681)
 - Vietnamese (619)
 - Filipino (608)
 - Chinese (605)
 - Korean (612)
 - Japanese (611)
 - Other Asian (621)
 - Other Race (Please specify) _____
- Are you of Spanish/Hispanic origin?
- No (999)
 - Yes, Mexican, Mexican American, Chicano (722)
 - Yes, Puerto Rican (727)
 - Yes, Cuban (709)
 - Yes, Other Spanish/Hispanic/Latino
Please specify _____

If NOT a U.S. Citizen, what is your immigration status?

- Student (F-1)
- Visitor
- Immigrant/Permanent Resident (IM)
- Other _____

How long have you resided in Washington state?

Years _____ Months _____

Were you financially independent from your parent or legal guardian for the previous calendar year? Yes No

If NO, how long has your parent or legal guardian resided in Washington state?

Years _____ Months _____

Are you active duty military, spouse or dependent child of same? Yes No

If YES, when was the active duty military person first stationed in Washington?

Month _____ Day _____ Year _____

Are you a higher education employee or dependent? Yes No

Select only one best response for the following questions.

How long do you plan to attend Columbia Basin 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 Don't know
- 90 Other

What is your current work status while attending college?

- 11 Full-time homemaker
- 12 Full-time employment (including self-employed 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 at entry to Columbia Basin College?

- 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 two years)
- 16 Associate's degree
- 17 Bachelor's degree or above
- 90 Other

What was your family status when you started at Columbia Basin College?

- 11 A single parent with children or other dependents in your care
- 12 A couple with children or other dependents in your care
- 13 Without children or other dependents in your care
- 90 Other

<hr/>				
Last High School Attended	City	State	Year	<input type="checkbox"/> Yes <input type="checkbox"/> No Graduated
<hr/>				
Last College Attended	City	State	Year	<input type="checkbox"/> Yes <input type="checkbox"/> No Graduated

What is your main long-term goal for attending Columbia Basin College?

- 11 Take courses related to current or future work
- 12 Transfer to a four-year college
- 13 High school diploma or GED
- 14 Explore career direction
- 15 Personal enrichment
- 90 Other

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Student Intent Codes:

- | | |
|--|---|
| A----- General Studies Degree or Certificate | J----- Occupational Supplement |
| B----- Academic Transfer | K----- Vocational Home and Family Life |
| D----- High School Diploma/GED Certificate | L----- General Studies (no degree or certificate) |
| E----- Development | W---- Community Service |
| F----- Occupational Preparatory | X----- Undecided |
| G----- Occupational Preparatory Applicant | Y----- None of the above |
| H----- Occupational Apprentice | |