

# Concurrent Enrollment Course **Registration** Form

Please provide ALL of the information below. Print clearly.

FALL  SPRING  SUMMER YEAR: 20\_\_\_\_ Check ONE semester only.

High School \_\_\_\_\_

Social Security Number \_\_\_\_\_

Anticipated date of High School graduation \_\_\_\_\_

Have you taken a TC3 course before?  Yes  No

Name \_\_\_\_\_  
(Last) (First) (M.I.)

Date of Birth (Month/Date/Year) \_\_\_\_\_ Gender:  Male  Female

Street Address/P.O. Box \_\_\_\_\_

City/State/Zip \_\_\_\_\_ County of Residence \_\_\_\_\_

E-mail Address \_\_\_\_\_

(Please note: Your e-mail address will be used only to contact you with College information)

Student's Phone Number \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_  
(Last) (First) (M.I.)

Parent/Guardian Phone Number \_\_\_\_\_

**Citizenship Information:**

- U.S. Citizen  
 Permanent Resident – Country of citizenship \_\_\_\_\_

Not a U.S. Citizen – Country of citizenship \_\_\_\_\_

Visa Type \_\_\_\_\_

Are you Hispanic/Latino? \_\_\_\_\_ Yes \_\_\_\_\_ No

**If yes, check only ONE of the following:**

1. Central American  
 2. Dominican  
 3. Mexican  
 4. Puerto Rican  
 5. South American  
 6. Other Hispanic/Latino

**Please indicate your race (select one or more):**

1. American Indian or Alaskan Native  
 2. Asian  
 3. Black/African American  
 4. Native Hawaiian or Other Pacific Islander  
 5. White

Course Number/Title	Course Start Time	Office Use Code	School Number	Office Use Only	Credits
sample: ENGL 101 - Academic Writing II	10:57	D	15		3
		D			
		D			
		D			
		D			

I give TC3 permission to release my grade(s) for the above course(s) to my high school:  Yes  No

**Total Credits** \_\_\_\_\_

I agree to abide by all campus/college rules and regulations that are in effect.

Student Signature \_\_\_\_\_  
Date \_\_\_\_\_

High School Instructor Signature \_\_\_\_\_  
Date \_\_\_\_\_

**Note:** You must provide your notarized Application for Certificate of Residency and necessary proof of residence with this registration form.