

Community & Continuing Education (CCE) Registration Form/Non-Credit Courses

YRQ:

Quarter Year 20 _____ Social Security Number _____ - _____ - _____

- Summer Fall
 Winter Spring

Student Status

- New Male
 Returning Female

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 comply with federal and state reporting requirements and to conduct institutional research. If you do not submit your SSN/ITIN, you will not be denied access to the college. Pursuant to state and federal law, the college will protect your SSN from unauthorized use and/or disclosure.

Student Identification Number (SID) _____ - _____ - _____

Your SID is assigned by Pierce College. You will use your SID to register and pay for courses each quarter.



Mail completed form to:

Pierce College Puyallup
 Attn: Registration Office
 1601 39th Avenue SE
 Puyallup, WA 98374-2222

LAST NAME	FIRST NAME	MIDDLE INITIAL	PREVIOUS LAST NAME (if applicable)

ADDRESS	CITY	STATE	ZIP

DAY TELEPHONE	EVENING TELEPHONE	BIRTH DATE MM/DD/YR	EMAIL ADDRESS

U.S. CITIZEN? Yes No*

If no, what type of VISA do you have?

- IMMIGRANT/PERMANENT RESIDENT - card # _____
 REFUGEE STUDENT VISA VISITOR

OTHER: _____

*If no, please provide a copy of your document(s)

Have you resided in WA State for the last 12 months?

This will not affect your Community & Continuing Education course fee

- Yes No

Need CEU's or Clock Hours?

CEU's and clock hours cost an additional \$20 per course

- CEU's
 Clock Hours

What race do you consider yourself to be?

- White (800)
 African American (872)
 American Indian (597)
 Alaska Native (015)
 Vietnamese (619)
 Chinese (605)
 Filipino (608)
 Korean (612)
 Japanese (611)
 Other Asian or Pacific Islander (621)
 Other Race _____

Are you of Spanish or Hispanic Origin?

- Yes (722) No (999)

Check the statement that best applies to your reason for enrolling:

- Take courses related to current or future work (J 11)
 Personal enrichment (Y 15)

ITEM NO.	COURSE TITLE	BLDG./ROOM	DAYS	TIME	START DATE	FEES

Add \$20 per CEU and clock hour course
 \$ _____ (x \$20)

Student Signature: _____ Date: _____ **TOTAL FEES:** \$ _____

PAYMENTS/REFUNDS: Payment is due at the time of registration. No refunds will be given when a student withdraws less than five (5) days prior to the first class session, after the course begins, or if the student does not attend or stops attending. A \$7 registration fee is nonrefundable. For complete information regarding CCE policy on payment and refunds see the bulletin/class schedule or visit the website at www.PierceCE.com. Questions? Contact us at (253) 840-8452 or (253) 864-3330

OFFICE USE ONLY	
	<input type="checkbox"/> Phone in
	<input type="checkbox"/> Mail in
	<input type="checkbox"/> Walk in
Initials & Date _____	