

Student REGISTRATION FORM | Part 1 of 2

COMMUNITY COLLEGE FALL WINTER SPRING SUMMER YEAR: 20 Check ONE semester only.							
STUDENT INFORMATION: Complete the information b	elow. Please print clearly.						
Name	Student ID Number						
Former Name (if applicable)	Social Security Number						
Permanent Address Apt #							
City/State/Zip	Phone (cell)						
County of Residence	Email						
Local Address (if different than above)	Emergency Contact Name						
City/State/Zip	Emergency Contact Phone						
NEW YORK STATE REQUIRED INFORMATION:	Please complete the information below. Print clearly.						
Birth Date (Month/Day/Year)://	Graduated from High School? Yes No Date of H.S. Graduation or Anticipated Graduation Received G.E.D.? Yes No Date received G.E.D. Check all that apply: I am a single parent I am a displaced homemaker Check only ONE statement that corresponds to your goal for attending Tompkins Cortland Community College: 1. Transfer to another SUNY college after earning a degree. 2. Transfer to a non-SUNY college after earning a degree. 3. Transfer to another SUNY college without earning a degree. 4. Transfer to a non-SUNY college without earning a degree. 5. Earn a degree/certificate and seek employment rather than pursue further post secondary education. 6. Learn new skills or upgrade existing skills without earning a degree. 7. Seek enrichment rather than to pursue a degree/certificate.						
My first language is	8. Obtain a Certificate of General Education Development (GED)						
Please indicate your ethnicity (select one or more): American Indian or Alaskan Native	through the accumulation of college credits. 9. Uncertain. Student has not determined his/her educational goal at this time.						
Asian Black – African American Native Hawaiian or Other Pacific Islander White Are you Hispanic/Latino? Yes No If yes, check only ONE of the following: Central American South American Dominican Cuban Mexican Other Hispanic/Latino	Check only ONE of the statements below: I am a current student at Tompkins Cortland Community College. I have attended Tompkins Cortland Community College in the past. I have never attended Tompkins Cortland Community College. I have never attended Tompkins Cortland Community College, but have attended another college. The college I last attended was:						
Mexican Other Hispanic/Latino Puerto Rican	AAS AA/AS BA/BS Masters Ph.D.						

revised 6/17



Student REGISTRATION FORM | Part 2 of 2

Name _					Student ID#
vide proof (unofficial transcript mpleted the prerequisite cou jister.	t, grade repo I rse(s), yo u	ort) of suc must ob	cessful cor	npletior ourse i	nd you took the course at another institution, you must of the prerequisite course. If you have not succes instructor's permission (signature or email) in order your registration form is processed.
Course Name/Number	Credits	Section	Sub Type	Audit	Instructor Signature
sample: ENGL 101	3	MO1	LEC	N	Instructor approves that the student may register for the course without the prerequisite.
the scheduled due date, and fail to College may refer my delinquent a see which may be based on a perc	il to pay my so make accept account to a contentage at a m	tudent acco table paym ollection ag naximum of	ount bill or a ent arranger ency. I furth 33.3333 per	nents to er under cent of r	es due and owing Tompkins Cortland Community College b bring my account current, Tompkins Cortland Community stand that I am responsible for paying the collection agency my delinquent account, together with all costs and expenses t my delinquent account may be reported to one or more of
Student Signature:					Date:

Students registering for six credits or more and born on or after January 1, 1957 must provide proof of MMR immunization to the Tompkins Cortland Community College Health Center. Call 607.844.8222, Ext. 4487 for more information.

SUBMIT THIS FORM:

BY MAIL

Tompkins Cortland Community College, **Enrollment Services Center** P.O. Box 139 | 170 North Street | Dryden, NY 13053-0139

BY FAX

607.844.6541

IN PERSON

DRYDEN: Room 101 | 170 North Street | 607.844.6580 ITHACA: 118 North Tioga Street | 607.272.3025 CORTLAND: 157 Main Street | 607.756.5275

Once we receive and process your registration form, a class schedule will be mailed to you.