SKAGIT VALLEY COLLEGE REGISTRATION FORM

SECTION 1: TO BE COMPLETED BY ALL STUDENTS (COMPLETION DOES NOT AFFECT STUDENTS CONSIDERATION FOR ADMISSIONS)														
						SN/ITIN # (if available)			QUARTER AND YEAR					
								□Summer □Fall □Winter □Spring 20		Skagit Valley				
LAST N	AME			FIRST NAME					M.I.	DATE OF BIRTH (MM/DD/YYY	Skagit Válley Where Learning College Comes to Life			
ADDRESS				CITY			STATE ZIP CODE		ZIP CODE	To comply with federal laws, we are required to ask for your Social Security Number (SSN) or Individual Taxpayer Identification				
PHONE				EMAIL ADDRESS					Number (ITIN). If you choose to submit your SSN/ITIN it will only be used to report payments made by you that may qualify for a tax credit or a tax deduction on your income tax return. We may also use this information to verify enrollment, degree and academic					
WHAT IS YOUR MAIN REASON FOR								NDER		transcript records, and to conduct institutional research.				
	ake course	_	' COLLEGE? 4 Explore career		kills for new job		☐ Male ☐ Female ☐ Non-binary ☐ Other:			If you choose not to submit your SSN or ITIN, you will not be				
related t	o job/worl	k direc	tion	☐ 12 Gain s	kills for current	job	☐ Prefer not to answer			denied access to Skagit Valley College; however, the IRS may subject you to civil penalties of \$50. Pursuant to state and federal law, the college will protect your SSN from unauthorized use				
	ransfer to a r college	-	5 Personal hment	☐ 13 Improv	e skills for care	er change	ARE YOU A VETERAN?							
☐ 13 High School ☐ 90 Other				☐ 90 Other			□Yes □No			and/or disclosure.				
Diploma	or GED	□ 99	9 No Response											
SECTION 2: TO BE COMPLETED BY ALL STUDENTS														
ADD	DROP	NUMBER	DEPARTMENT	COURSE	SECTION	# OF CREDITS		0 D F	PREREQUISTE OR PERMISSION OVERRIDE (STAFF & FACULTY ONLY) Courses approved to enroll in:					
		0000	ENGL	101	Α	5	(If app	plicable)	erequisite(s) required	d:				
								Pr	Prerequisite met by:					
									Transcript/Verification of prerequisite is required to be attached to this form.					
Ш								In	Instructor/Advisor Printed Name:					
								Si	Signature:					
									LATE ENROLLMENT/ADDITIONS TO SEQUENTIAL CLASSES					
									Permission to enroll in: Attended since:					
									Instructor/Advisor Printed Name:					
Ш								Si	gnature:					
\square Senior Waiver \square Classified/State Employee Waiver \square Other Waiver:											DATE STAMP & INITIALS			
Complete Withdrawal? ☐ Last date of attendance: ☐ I d									did not attend any	classes this quarter.				
I hereby certify that to the best of my knowledge, all statements on this form are true and correct:														
Student Signature:									Date:					

		SECTION 3: TO BE COMPLET	TED BY ALL NEW STUDEN	NTS		
Are you a U.S. Citizen? ☐ Yes ☐ No		Have you been a legal resident of N continuously in Washington for the	•	A. Were you claimed for federal income tax purposes by your parent(s), or your legal guardian in the current calendar year: ☐ Yes ☐ No		
If you are undocumented, but have		☐ Yes ☐No		B. Were you claimed in the <i>last</i> calendar year? ☐ Yes ☐ No C. If YES, has your parent, or legal guardian lived continuously in the State of Washington for the past 12 months? ☐ Yes ☐ No		
GED you may be eligible for in-sto Residency Specialist at 360-416-7		IF NO how long have you been in W	/A? Months			
How long do you pla	an to attend SVC?	What is your current	education level?	What race do you consider yourself (up to two):		
 □ 11 One Quarter □ 12 Two Quarters □ 13 One Year □ 14 Up to two years – no 	☐ 15 Long enough to complete a degree☐ 16 Unsure☐ 90 Other	 □ 11 Less than high school Grad □ 12 GED □ 13 High School Graduate □ 14 Some college 	☐ 15 Certificate☐ 16 Associate Degree☐ 17 Bachelors or Higher	☐ African American (872) ☐ Alaskan Native (015) ☐ American Indian (597) ☐ Caucasian (800)	☐ Korean (612)☐ Native Hawaiian (653)☐ Vietnamese (619)☐ Other Asian (621)	
degree				☐ Chinese (605)	\square Other Pacific Islander (681)	
What is your curre		What is your currer		☐ Filipino (608)	☐ Other:	
11 Full-time homemaker	☐ 15 Not employed	☐ 11 A single parent with	☐ 13 Without children or	☐ Japanese (611)		
☐ 12 Full-time employed	but seeking	children or other dependents in	other dependents in your	Are you of Latinx Ethnicity?		
☐ 13 Part-time, off campus☐ 14 Part-time, on campus☐	☐ 16 Not employed and not seeking☐ 90 Other	your care 12 A couple with children or other dependents in your care	care □ 90 Other	☐ No (999) ☐ Latinx (720) ☐ Mexican, Mexican	☐ Puerto Rican (727) ☐ Cuban (709) ☐ Other:	
	ENROLLMENT/REGIS	TRATION INFORMATION		American, Chicano (722)		
 Loss of future financial Potential adverse effec Increased time-to-degr Miss the opportunity to 	e to dropping below the minimulaid, Veteran's assistance, and retupon application to future educe or certificate completion of work with an instructor for a graduation. Running Start stude	Do you have a disability? Persons with a disability may be eligible for support services and should call the Disability Access Services Office. Mount Vernon: 360-416-7654 Whidbey Island: 360-679-5393 FEDERAL EDUCATIONAL RIGHTS & PRIVACY ACT Reports or information on the Federal Educational Rights & Privacy Act also referred to as FERPA, student rights and responsibilities, state funding support, graduation rates, placement rates, scholarships and crime statistics are published periodically in the Cardinal Newspaper, in compliance with federal and state laws. Copies of this information are also available upon request from Student Programs.				
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religion, national origin, sex, gen its programs and employmen	nder identity, sexual orientation	inate on the basis of race, color, , disability, marital status, or age in en designated to handle inquiries olicies:	SVC ofrece un entorno libre de drogas y no discrimina por motivos de raza, color, religión, origen nacional, sexo, identidad de género, orientación sexual, discapacidad, estado civil o edad en sus programas y empleo. La siguiente persona ha sido designada para manejar las consultas relacionadas con las políticas de no discriminación:			
	Carolyn Tucker		Carolyn Tucker			
	esident of Human Resources and st College Way, Mount Vernon, 360.416.7794	WA 98273	Vicepresidente Asociado de Recursos Humanos y Coordinador del Título IX 2405 East College Way, Mount Vernon, WA 98273 360.416.7794			
	Carolyn.Tucker@skagit.edu		Carolyn.Tucker@skagit.edu			