

# WVC REGISTRATION FORM

|                         |                     |  |   |   |
|-------------------------|---------------------|--|---|---|
| <b>SID/SSN NUMBER *</b> | <b>Today's Date</b> | <b>Quarter of Registration</b> Year _____<br>___ Fall ___ Winter ___ Spring ___ Summer | <b>Telephone Number</b><br>Day _____<br>Evening _____ | <b>Type of Student</b><br>___ New<br>___ Continuing from last qtr<br>___ Former |
|-------------------------|---------------------|--|---|---|

|                        |                   |               |                         |
|------------------------|-------------------|---------------|-------------------------|
| <b>Last Name</b>       | <b>First Name</b> | <b>Middle</b> | <b>Previous Name(s)</b> |
| <b>Mailing Address</b> |                   | <b>City</b>   | <b>State</b> <b>Zip</b> |
| <b>E-Mail Address</b>  |                   |               |                         |

| ID# | Dept. | Number | Section | Course Title | Credit |
|-----|-------|--------|---------|--------------|--------|
|     |       |        |         |              |        |
|     |       |        |         |              |        |
|     |       |        |         |              |        |
|     |       |        |         |              |        |
|     |       |        |         |              |        |
|     |       |        |         |              |        |
|     |       |        |         |              |        |

**A.** Gender: \_\_\_ Male \_\_\_ Female

**B.** Date of Birth \_\_\_/\_\_\_/\_\_\_

**C.** How long have you lived continuously in Washington?  
\_\_\_ years \_\_\_ months

**D.** Are you a U.S. citizen? \_\_\_ Yes \_\_\_ No  
If no, check one of the following:  
\_\_\_ International Student \_\_\_ Refugee \_\_\_ Visitor  
\_\_\_ Immigrant visa # \_\_\_\_\_

**E.** What is your ethnic origin? (check one)  
\_\_\_ Alaskan Native or American Indian (597)  
\_\_\_ Black/African American (870)  
\_\_\_ Chinese (605)  
\_\_\_ Filipino (608)  
\_\_\_ Japanese (611)  
\_\_\_ Korean (612)  
\_\_\_ Mexican, Mexican American, Chicano (722)  
\_\_\_ Puerto Rican (727)  
\_\_\_ Cuban (709)  
\_\_\_ Other Spanish/Hispanic/Latino  
\_\_\_ Vietnamese (619)  
\_\_\_ White (800)  
\_\_\_ Other Asian or Pacific Islander (621)  
\_\_\_ Other Race (799)

**F.** What is your purpose for attending this community college? (circle one)  
11 – Take courses related to current or future work.  
12 – Transfer to a four-year college/AAS Degree.  
13 – High School diploma or GED.  
14 – Explore career direction.  
15 – Personal enrichment.  
90 – Other.

**G.** Do you have a physical, sensory or mental impairment that substantially limits one or more of the major life functions, such as seeing, hearing, speaking, walking, breathing, working with your hands, learning, caring for yourself and working?  
\_\_\_ Yes \_\_\_ No

**Wenatchee Campus Fees**

|                      |        |
|----------------------|--------|
| Tuition              |        |
| Registration Fee     | \$5.00 |
| \$3 per Cr. Tech Fee |        |
| Special Fee(s)       |        |
| \$5 per Cr Rec Fee   |        |
| <b>TOTAL DUE</b>     |        |

**Omak Campus Fees**

|                      |  |
|----------------------|--|
| Tuition              |  |
| Registration Fee*    |  |
| \$3 per Cr. Tech Fee |  |
| Special Fee(s)       |  |
| <b>TOTAL DUE</b>     |  |

**\*Social Security Number Request**  
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 report Hope Scholarship/Life Time tax credit, to administer state/federal financial aid, to verify enrollment, degree and academic transcript records, and to conduct institutional research. If you do not submit your SSN/ITIN, you will not be denied access to the college; however you may be subject to civil penalties (refer to Internal Revenue Service Treasury Regulation 1.6050s-1(e)(4) for more information). Pursuant to state law (RCW 28B.10.042) and federal law (Family Educational Rights and Privacy Act), the college will protect your SSN from unauthorized use and/or disclosure.

\* Omak Campus registration fee is \$1 per credit up to a maximum of \$10. This includes parking.

Parking permits may be purchased at the cashier's office

**Please write Student ID Number on front of check.**  
If you charge your payment, indicate: \_\_\_ Visa \_\_\_ MasterCard  
Account # \_\_\_\_\_ Expir. Date \_\_\_\_\_

\_\_\_\_\_  
Cardholder's Name

\_\_\_\_\_  
Cardholder's Signature

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
Adviser's Signature

# New and Former Students Taking Credit Classes

|  |                |       |      |                     |
|--|----------------|-------|------|---------------------|
| Last high school attended                                | City           | State | Year | Graduated<br>Yes No |
| Last college attended                                    | City           | State | Year | Graduated<br>Yes No |
| Are you currently enrolled in any school other than WVC? | ___ Yes ___ No |       |      |                     |
| If yes, name of school                                   |                |       |      |                     |

How long do you plan to attend Wenatchee Valley College?

*(circle the number that best applies to you)*

- 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 – I don't know

What is your current work status while attending college?

*(circle the number that best applies to you)*

- 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.

What is your prior level of education to Wenatchee Valley College?

*(circle the number that best applies to you)*

- 11 – Less than high school graduate
- 12 – GED
- 13 – High school graduate
- 14 – Some post high school, but no degree or certificate
- 15 – Certificate (less than two years)
- 16 – Associate degree
- 17 – Bachelor's degree or above

What was your family status when you started at Wenatchee Valley College?

*(circle the number that best applies to you)*

- 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

**PLEASE CHECK ONE:**

I give permission to include my name in honor roll and graduation information releases to the news media.

\_\_\_ Yes \_\_\_ No

Mail to:  
Wenatchee Valley College  
Registration Office  
1300 Fifth Street  
Wenatchee, WA 98801

OR

Mail to:  
Wenatchee Valley College  
Registration Office  
P O Box 2058  
Omak, WA 98841