

## **REGISTRATION FORM**

For Continuing Education (non-credit) Courses

Last Name		First Name     M.I.     Former Last Name (if applicable)					Date of Birth		
Student ID No.		ent ID, or don't remember? Prov we ask for SSN? NorthwoodTe	,	☐ I've ta	$\square$ I've taken classes at Northwood Technical College and/or WITC in the past.				
Email address (requ	uired as email is primary metl	hod of communication by the college)		— —	Home phone Cel		l phone		
Home address			City			State	ZIP Highest gra		
Resident of (check	one): 🛛 Township 🗆 Villad		ounty School Dist	rict where v	un live Last high s	school attende	COMPLETE	) (K-12)	
,	mation is required for state a			,	5		50		
Gender:  Male		: Hispanic/Latino origin							
Race (check all that apply):						er 🛛 White	_	USE ONLY	
Highest Credential Earned							Term		
No Credential		college credit	□ 2yr Diploma		Baccalaureate More than Baccal		Received by		
GED HSED	or ce	Short-term diploma         Associate Degree         More than Baccalaureate           or certificate         Associate Degree         Student Declined/Unknow					Date registration entered		
High School E	Diploma 🛛 1yr Dip lity to contact Northwood Tec		Plus Additiona						
	refund amount. A full refund w					,			
CLASS NO.	CATALOG NO.	CL	ASS TITLE		LOCATION		START DATE	CLASS FEE	
TBD	47504420	Slide Mounted	d Optics	F	RL Indoor Range	3	Jan 24	40.00	
			•				<u> </u>		
Once registered fo	or a course(s), you have created	a liability with Northwo	od Tech and a promise to	рау.			<b>TOTAL</b> \$40	.00	
A full detailed Annual Security Report can be located at the following link: www.northwoodtech.edu/annualsecurityreport Northwood Tech is an Equal Opportunity/Access/Affirmative Action/Veterans/Disability Employer and Educator. <b>Traffic-Related Registration:</b> Motorcycle, Traffic Safety, Group Dynamics, Multiple Offender									
Driver's License Nu	mber		Assessment Age	ency and Da	ate				
Youth Registration	: With parent/guardian appro ninimum age prerequisites.							school hours. Some	
Parent/Legal Guard	Parent/Legal Guardian name: Date: Date:								
Agency Bill/Sponso	pleas) r <b>ed Registration:</b> If an agency o	se print) or employer has agreed tr	o pay your tuition, provide	organization	ı name, signature and attach v	vritten authoriz	ation.		
	Agency or EMS/Fire Sponsor			-	-				
	ood Tech to forward informa								
			F				Student Signature	08.10.21	
PAYMENT METH	,	□ Check/money order payable to Northwood Technical College CK # □ Cash □ Agency bill (complete section above							
	$\Box$ Credit Card No	Credit Card No Exp. Date					Security C	ode	
		(	(Mastercard/Visa/Discove	ər)		(month/y	ear)		
Name on Card Cardholder Signature									