Northwood Technical College

REGISTRATION FORM
for Continuing Education (non-credit) Courses

LOCATION

TIRAP Registration Form

Please contact dan.schullo@northwoodtech.edu with any questions.

Last Name   **First Name**   **M.I.**   **Former Last Name (if applicable)**   **Date of Birth**

☐ I've taken classes at Northwood Tech in the past.

☐ Age 62+?

Northwood Tech Student ID No.   **Social Security No.**
Why do we ask for SSN? NorthwoodTech.edu/SSN

If you are a Broadband/Telecommunications employee, please provide the company name and address.

Email address (*required for college alerts and important communication*)   **Home phone**   **Cell phone**

Home address   **City**   **State**   **ZIP**

Highest grade COMPLETED (K-12): _____

Resident of (check one): ☐ Township ☐ Village ☐ City ☐ County   **School District where you live**   **Last High school attended**

Gender: ☐ Male   ☐ Female   **Ethnicity: Hispanic/Latino origin?** ☐ Yes ☐ No

Race (check all that apply): ☐ American Indian/ Alaska Native ☐ Asian ☐ Black/African American ☐ Native Hawaiian/Other Pacific Islander ☐ White

Highest Credential Earned:

☐ 01 = No Credential
☐ 02 = GED
☐ 03 = HSED
☐ 04 = High School Diploma

☐ 05 = Some college credit
☐ 06 = Short-term diploma or certificate
☐ 07 = 1yr Diploma

☐ 08 = 2yr Diploma
☐ 09 = Associate Degree
☐ 10 = Associate Degree Plus Additional Credential

☐ 11 = Baccalaureate
☐ 12 = More than Baccalaureate
☐ 99 = Student Declined/Unknown

*****It is your responsibility to contact Northwood Tech to officially drop a class.** If you decide to drop, you should do so immediately as a single day can affect your refund amount. A full refund will be given if you notify Northwood Tech prior to the first scheduled class meeting.

Course Number	Catalog Number	Course Title	Program	Start Date	End Date	Instructor	Fees	Credits

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PAYMENT METHOD: ☐ Check or money order payable to Northwood Tech ☐ Cash ☐ Mastercard ☐ Visa ☐ Discover   Exp. Date _____   Security Code _____
Month/Year

☐ Agency Bill/Sponsored Registration - complete information below; attach required authorization.

_____   _____   _____
Credit Card No.   Name on Card   Cardholder Signature

Name of Business/Agent Sponsor: _____

I authorize Northwood Tech to forward information regarding the completion of this course to the sponsor listed on the line above. _____
Student Signature