

Registration Form

Instructions:

1. Meet with your advisor and complete this form
2. Submit completed form to the Records Office
3. Check with the Business Office regarding fees/billing

Full Legal Name _____

Student ID Number _____

Major(s) _____

Academic Term Fall 20_____ Spring 20_____ Summer 20_____

Have you been an Ohio resident for the past 12 months? Yes No

Student Type - Please check one of the following:

- New Student**
- Continuing/Returning** (have been previously/continuously enrolled at WSCC)
- Transfer** (never attended WSCC and have credit from another institution)

Call Number	Course Number	Section	Course Name	Credit Hours	Audit (x)	PreReq Met?

_____ (initials) By registering for classes at Washington State Community College, you incur and acknowledge a legal obligation to pay tuition and fees. You are not charged for classes for which you are on a waitlist. However, by agreeing to be placed on a waitlist, you acknowledge that you might be enrolled in the waitlisted class, without further notification, and you are responsible for any resulting tuition and fees. If you withdraw from your classes, you may be responsible for a portion or all of the original tuition and fees. You will not be administratively withdrawn from courses for non-attendance. You must officially cancel (drop) the courses you are not attending, or you will receive the failing grade at the end of the semester. Refer to the applicable Fee Payment Schedule for more detailed information about cancellation of registration, dropping of classes, applicable refund policies and other relevant policies.

Student Signature _____ **Date** _____

Advisor Signature _____ **Date** _____