

TVCC Student ID –or– Social Security Number*

Date of Birth (Required)

Last Name

First Name

M.I.

Permanent Physical Address

City

State

Zip

Mailing Address (if different than above)

City

State

Zip

Home Phone

Cell Phone

Work Phone

E-mail Address (Required)

Company PO# _____ (must be presented) Company _____

Agency Voucher _____ (must be presented) Agency _____

QUARTER: _____ SUMMER _____ FALL _____ WINTER _____ SPRING

CLASSES ADDED:

(Please Initial)	Course #	Section	Course Title	Time	Days	Instructor	Cost
	RE 095	OA	OR Property Manager Pre-License Course Online Via Zoom	7:00 pm - 9:00 pm	Tuesdays	Juare	\$550

CLASSES DROPPED: Subject to CBWCL Policy.

Course #	Section	Course Title	Credits	Time	Days	Instructor	Cost

Gender:

- Male Female

U.S. Veteran?

- Yes No

Citizenship:

- U.S. Citizen/ Oregon
 U.S. Citizen/NOT Oregon
 Not a U.S. Citizen

High School completed:

- Still in high school
 High School Diploma
 GED
 High School Diploma from a Community College
 Other _____

Select your ethnicity:

- Hispanic / Latino
 Not Hispanic / Latino

Select your preferred race:

- American Indian / Alaskan Native
 Black / African American
 Native Hawaiian / Pacific Islander
 Asian
 White
 Other

Highest degree level you have completed:

- None
 Other (short term training)
 1-Year Certificate
 2-Year Associate Degree
 Bachelor's Degree
 Master's Degree
 Ph.D./Professional Degree

Marital Status:

- Divorced / Separated
 Married
 Single
 Widowed

Primary reason for attending TVCC:

- Take transferrable classes
 Learn skills to get a job ___Improve job skills
 Explore Career / Academics
 Take classes to earn HS diploma / GED
 Improve reading/writing/math skills
 Learn English Language
 Personal Interests / enrichment
 Other: _____

*Providing your social security number is voluntary. If you provide it, the college will use your social security number for keeping records, doing research, reporting, extending credit, and collecting debts. The college will not use your number to make any decision directly affecting you or any other person. Your social security number will not be given to the general public. If you choose not to provide your social security number, you will not be denied any rights as a student. Providing your SSN means that you consent to the use of your number in the manner described.

Persons having questions about or requests for special needs and accommodations should contact the Disabilities Services Coordinator at Treasure Valley Community College, 650 College Blvd., Ontario, OR 97914. Telephone (541) 881-5812.

By signing this registration form, I agree to pay all tuition and fees applicable to the courses registered for above. Charges are subject to change at any time before the start of an academic quarter. The current charges can be found in the most recent printed class schedules, and on the college website. Whether or not any court action is involved, all expenses, fees, attorney fees and actual collection costs incurred by TVCC in an attempt to collect funds due shall become a part of the unpaid principle balance and payable upon demand. When expenses, fees and collection costs become a part of the unpaid principle balance, I understand my debt to TVCC may double. In the event legal action is instituted for the collection of this debt, the prevailing party shall be entitled to recover, at trial and on appeal, reasonable attorney fees and costs.

Student Signature

Date

Advisor Signature

Date