

Promoting Access and Equity in Higher Education!

**2018-2019 CORE COLLEGE
REGISTRATION FORM**

Personal Information:

<input type="radio"/> Male <input type="radio"/> Female	Date of Birth / /
Student Name – Last: _____	First: _____ Middle: _____
Mailing Address: _____	
City: _____	State: _____ Zip: _____
Home Phone (include area code): _____	Cell Phone (include area code): _____
Email Address: _____	Returning Student: Yes: <input type="radio"/> No: <input type="radio"/>

Are you Hispanic, Latina or Latino?

No, not Hispanic, Latina or Latino Hispanic, Latina or Latino

Select one or more of the following racial categories to describe yourself:

American Indian or Alaska Native Asian White
 Black or African American Native Hawaiian or Other Pacific Islander

Please list any special needs: _____

In case of emergency contact: _____

Relationship _____ Emergency Contact Phone () _____

High School Information:

High School: _____	City/State: _____	Zip: _____
High School Counselor: _____	Current Grade: _____	

Parent/Guardian Information:

Parent/Guardian Name: _____	<input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms.
Parent/Guardian Home Phone (include area code): _____	Parent/Guardian Cell Phone (include area code): _____
Parent/Guardian Email Address: _____	

Compliance Statement:

During my enrollment in the Core College Program, I agree to comply and adhere to the rules and regulations of Core Elements Higher Education Resource Center. I also acknowledge failure to do so may result in my dismissal from the program. I certify, to the best of my knowledge, all statements I have made on this registration form are complete and true.

Participant's Signature: _____ Date: ____/____/____

Parent's Signature: _____ Date: ____/____/____

The completed form may be faxed, emailed, or mailed to our office (please see contact information above).