COMMUNITY COLLEGE OF VERMONT

REGISTRATION FORM FOR NON-DEGREE & RETURNING STUDENTS

You may use this form if you have enrolled at CCV within the past 12 months or if you have previously completed a college degree. If not, please apply online at www.cccv.edu or at your local CCV office. Items marked with an asterisk***** are required. Please print clearly.

* Preferred Title ❑ Mr. ❑ Ms. ❑ Mrs. ❑ Miss

* Legal Name_____ ❑ Jr. ❑ Sr.
First Name Middle Name Last Name

* Street Address _____ * Mailing Address (if different) _____

* City _____ * State ____ * Zip _____ * City _____ * State _____ * Zip _____

Email Address (required for online students) _____

* Phone 1 ( ) _____ – _____ Ext. _____ Type: ❑ Home ❑ Work ❑ Fax ❑ Cell/Mobile ❑ Pager ❑ TTY

Phone 2 ( ) _____ – _____ Ext. _____ Type: ❑ Home ❑ Work ❑ Fax ❑ Cell/Mobile ❑ Pager ❑ TTY

ADMISSIONS INFORMATION FOR NEW NON-DEGREE STUDENTS

* Date of Birth (for identification purposes only) _____ / _____ / _____ Gender: ❑ Male ❑ Female

* Student ID# (for returning students) __ __ __ __ __ __ __

* Social Security Number (for all new CCV students) _____ - _____ - _____ *NOTE: Colleges are required by the federal government (IRS1098-T) to obtain social security numbers from all tuition-paying students. You will be issued a student ID number for all your future CCV transactions.*

Ethnic Background (choose one): ❑ American Indian/Alaskan Native ❑ Asian/Pacific Islander ❑ Black, Non-Hispanic ❑ Hispanic ❑ White, Non-Hispanic ❑ Non-resident Alien

Do you have a disability? ❑ Yes ❑ No

* Admission Status: ❑ Non-Degree ❑ High School (taking CCV and high-school classes at the same time)

NOTE: New degree students must apply online at www.ccv.edu/apply or at your local CCV office.

* Primary CCV Location: *(choose one)*
❑ Bennington ❑ Brattleboro ❑ Burlington ❑ Middlebury ❑ Montpelier ❑ Morrisville ❑ Newport ❑ Online Learning ❑ Rutland ❑ Springfield ❑ St. Albans ❑ St. Johnsbury ❑ Upper Valley (White River Jct.)

* Semester you are enrolling _____ * Are you enrolling ❑ Full time (12 credits or more) ❑ Part time (less than 12 credits)

* Have you maintained legal residence in Vermont for the last 12 months? ❑ Yes ❑ No *If no, what was your previous state of legal residence, or if you currently reside outside of Vermont, what is your state of legal residence?* _____

* Are you a U.S. citizen? ❑ Yes ❑ No *If no, please complete a CCV admissions form online at www.ccv.edu/apply or at your local CCV office.*

* High school where you completed, or plan to complete, your high school diploma:

_____
School *City* *State*

❑ Home-schooled ❑ GED–General Equivalency Diploma * Year you did, or plan to, graduate from high school or complete your GED: _____

* Has either of your parents earned a four-year college degree? ❑ Yes ❑ No

Have you already completed a college degree? ❑ Yes ❑ No *If not*, ❑ I have already taken CCV's basic skills assessments.

❑ I am enclosing a copy of my unofficial college transcript(s) for an advisor to determine if assessments can be waived.

REGISTRATION – PLEASE REGISTER ME FOR THE FOLLOWING COURSES: To register and pay online, login to https://blackboard.vsc.edu.

COURSE NUMBER & SECTION	TITLE	INSTRUCTOR	CREDITS	TUITION	COURSE FEES
- - V					
- - V					
- - V					
- - V					

PAYMENT MUST ACCOMPANY THIS REGISTRATION FORM.

Check enclosed payable to CCV $ _____

Credit card # _____ Exp. date _____

3-4 digit security code printed on your card _____

Cardholder name_____

Billing address _____

NON-REFUNDABLE REGISTRATION FEE $	50.00
TUITION TOTAL $	
COURSE FEES TOTAL $	
GRAND TOTAL $	

❑ *I understand that I may access all CCV policies pertaining to students at www.ccv.edu/policy and I also understand that the Vermont State Colleges maintain a single course database, student records system and official transcript for all VSC colleges (CCV, CSC, JSC, LSC, VTC). As a student at one VSC college, I understand that if I apply to another VSC college, my official transcript will be reviewed electronically by the admissions office at the VSC college to which I am applying. By signing below, I grant permission for an electronic review of my official VSC transcript by another VSC college admissions office.*

❑ *I certify that all of the above information is accurate and complete. I understand that withholding information requested in this form or giving false information may make me ineligible for admission to or continuation at a Vermont State College institution.*

❑ *I understand that credits earned at the Vermont State Colleges are transferable to other colleges or universities only at the discretion of the receiving institution.*

*Applicant's Signature _____ Date _____