



STUDENT REGISTRATION FORM

staff use only

MODIFIED FOR ONLINE ORIENTATION

Date form completed _____

Name _____

Last

First

M.I.

Maiden or other former name

Address _____ Apt.# _____ Phone 1 _____

City _____ State _____ Zip _____ County _____ Phone 2 _____

Are you over 16 and formally withdrawn from school? Yes No Email _____

General Information

Do you have an F-1 Visa? Yes No

Education (including from another country)
Last full grade completed _____

Did you graduate from high school or its equivalent?
Yes No

What are your goals for coming to this program?

- To improve basic skills
- To improve English language skills (ESOL)
- To obtain a job
- To retain or improve current job
- To earn high school equivalence or secondary school diploma

- To enter postsecondary education or training
- To decrease public assistance received
- To obtain citizenship skills
- To register to vote or to vote for the first time
- Other (Specify _____)