| Date | No | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| | MMUNITY & TECHNICAL COLLEGE REGISTRATION FORM | | | | | | | |
| (Please Print) First Name: | Last Name: WKCTC Student ID: | | | | | | | |
| Appt with: | Appt Time: Arrival Time: | | | | | | | |
| Advisor: | Assigned Advisor: | | | | | | | |
| Have you applied to WKCTC? YES NO | Have you taken the ACT or COMPASS? YES NO | | | | | | | |
| Do you have a program of study? YES NO | If yes, which one? | | | | | | | |
| Do you plan on transferring? YES NO | If yes, where? | | | | | | | |
| CI | heck all that apply: | | | | | | | |
| I am currently taking classes at WKCT | C. | | | | | | | |
| I have previously taken classes at WK | CTC but I am not currently taking classes. | | | | | | | |
| I have taken classes at another college Name of college/university(s): | e or university. | | | | | | | |
| I am a transient (visiting) student. | | | | | | | | |
| I would like to register for classes. | | | | | | | | |
| I have registered for classes but | | | | | | | | |
| I would like to change my schedule. | | | | | | | | |
| I need to complete a Financial Aid Aca | demic Plan of Action. | | | | | | | |
| I am only requesting information at this | s time. | | | | | | | |





OFFICE USE ONLY - CHECK ALL THAT APPLY

| _ Add | | | | | AP armiae | sion to | oolf o | nroll | | |
|------------------------|----------------|------------------|------|-----|--------------|---------|-------------|--------|--------------------------|--|
| _ New Schedule | | | | _ P | ermiss | SION (C | self-e | enroll | | |
| Semester | T | | | T | T | T | | | Year | |
| Course ID | Dept Prefix | Course Number | M | Т | w | R | F | Time | Credit/Audi Pass/Fail | |
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| | | | | | | | | | | |
| Student's Signature | | Phone Number | | | | | | | | |
| Advisor's Signature | | | Date | | | | | | | |
| Signature | Signed | | | | | | | | | |