REGISTRATION APPLICATION

570 Golden Eagle Ave., Quincy CA 95971

530-283-0202

Credit/No Credit

NEW STUDENT	
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RETURNING STUDENT

	CRN #	Course #	Course Descriptio	DN
Date		FRC ID	# or SS #:(optional)	
Last Nan	ne	Firs	st	Initial
Mailing Address				
	PO Box/Street Address	City	State	Zip
Phone ()	-	Email Address		
Grade Level	Name of Sch	1001		
Semester for which you are	e registering: Fall	Spring	Summer 2	0

<u>RESIDENCY</u>:

For students **UNDER 19**, and not married, answer these questions as they pertain to your parents.

1. Have your PARENTS lived outside California during the last two years?	YES NO
2. In the last two years have your PARENTS registered to vote or petitioned for divorce in a state other than California?	YES NO
3. In the last two years, have your PARENTS declared non- residence for income tax purposes?	YES NO
4. In the last two years, have YOU attended a state college or university as a resident of another state?	YES NO

<u>U.S. Citizen</u> UES NO (If <u>NO</u> answer questions below)

If you are <u>NOT</u> a U.S. Citizen, please circle status and enter ARN:
1Permanent Resident
2 Temporary Resident (Amnesty)
3 Refugee/Asylum
4 Student Visa (F-1, M-1, VISA)
5 Other
A-Number (ARN)*
Date issued

If not a U.S. Citizen, <u>COUNTRY</u> of permanent address:

If not a California resident, <u>STATE</u> of permanent address:

If not a Plumas County resident, <u>COUNTY</u> of permanent address:

<u>Gender</u>	M=Male	Birth Date:	/		/
	F=Female X= Other/decline to state		Month	Day	Year
Student Eth					
	A Asian AC Chinese AI Asian Indian AJ Japanese AK Korean AI Laotian AM Cambodian AV Vietnamese AX Other Asian	BAfrican-American FFilipino HHispanic HMMexican, Mexican/Ar HRCentral American HSSouth/American HXOther Hispanic NAmerican Indian/Alas OOther Non-White	,		P Pacific Islander PG Guamanian PH Hawaiian PS Samoan PX Other Pacific Island W White/Non-Hispani XD Decline to state

Signature:

Date:

Signature:

Date:

By signing this form, I certify that the student's attendance at Feather River College is in compliance with Section 48800 of the Education Code and that the student demonstrates the ability to benefit from instruction at Feather River College. In addition, K-12 attendance is monitored to not recommend more than 5% of total number of students of any single grade level for summer enrollment.

Signature:	Contract on file in Instruction	Date:	

I certify that the information on this application is correct, and I understand that falsification may result in my dismissal from Feather River College. I understand that the information on this form will be made available to my school official and state agencies for research purposes.

Signature:	Date:		
Due to higher education rules concerning confidentiality of college students,			
registration for courses is to be conducted personally by the <u>High School</u> student not by a proxy.			
Please proceed to the Admissions and Records Office to officially regis	ter and pay your fees.		

APPROVAL OF REGISTRAR			
Signature:		Date:	
OFFICE USE.			
OFFICE USE:			
SOAHOLD	Admissions	Date:	