



# Registration Form

Please Print

For office use only: Year _____	<input type="checkbox"/> Summer	<input type="checkbox"/> Fall
	<input type="checkbox"/> Spring/Super Spring	
Registration Date _____	Entered by _____	

## (1) Student Information

1) Student ID Number	2) Last Name	First Name	Middle Name	3) Prior or Maiden Name
4) Mailing Address – Street Address		City	State	Zip Code
5) Are you a legal resident of Kenosha, Racine, or Walworth County? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, what is the address of your legal residence?		6) Are you a U.S. Citizen or legal permanent resident? <input type="checkbox"/> Yes <input type="checkbox"/> No		7) If you are not a U.S. citizen or legal permanent resident, are you in the U.S. on a Visa? <input type="checkbox"/> Yes <input type="checkbox"/> No Visa type _____ Country _____
City _____ County _____ State _____		9) Home Phone _____		10) <input type="checkbox"/> Business Phone <input type="checkbox"/> Cell Phone
8) E-Mail Address _____	11) Social Security Number _____	12) Date of Birth (month/day/year) _____/_____/_____	13) Age _____	14) Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
16) Name of high school attended _____ State _____		17) Check highest grade completed (high school/college): <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20		15) If you are under 21 or attending Gateway Technical College under Youth Options, a 118.15 contract or a HSED contract, the High School information on the next line is required.
19) Did you receive a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, month/year _____		20) Did you receive an HSED? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, month/year _____		18) Did you graduate from high school? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what year? _____
23) What is your primary reason for enrolling at Gateway? <input type="checkbox"/> Complete an Associate Degree or Technical Diploma (DD) <input type="checkbox"/> Complete a certificate (CC)		<input type="checkbox"/> Take refresher course(s) (RC) <input type="checkbox"/> Gain computer skills (CS) <input type="checkbox"/> Improve job skills (JS)		<input type="checkbox"/> Take course(s) to transfer to another school (TR) <input type="checkbox"/> Complete AHS, GED, or HSED (HS) <input type="checkbox"/> Take course(s) for personal enrichment (PE)
24) Are you a single parent? <input type="checkbox"/> Yes <input type="checkbox"/> No	25) Are you a displaced homemaker? <input type="checkbox"/> Yes <input type="checkbox"/> No	26) What is your work status? <input type="checkbox"/> Employed Full Time (01) <input type="checkbox"/> Employed Part Time (02) <input type="checkbox"/> Underemployed (03) <input type="checkbox"/> Unemployed – Seeking Work (04) <input type="checkbox"/> Not in Labor Market (05) <input type="checkbox"/> Dislocated Worker (06)		

## (2) Course Registration

Class # (9 or 10 digits)	Class Title	Day & Time	Credits	Class Fee

## (3) Student Certification Statement

I hereby certify that, to the best of my knowledge, the information furnished above is true and complete without intent of evasion or misrepresentation.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## (4) Counselor/Advisor Approval (Counselor/Advisor: Please mark an 'X' through any unused lines in section 2 above.)

Counselor/Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_