

CONTINUING EDUCATION REGISTRATION FORM

Last Name	First	MI	Date of Birth (month/date/year)
Mailing Address		State	Zip Code
Cell Phone Number		Home Phone Number	Work Phone Number

TERM _____	LCC PID# _____
Residency Status:	
<input type="checkbox"/> Texas Resident (I certify that I have lived in TX for the last 12 months) <input type="checkbox"/> Non-Texas Resident (What state are you a resident of? _____) <input type="checkbox"/> Foreign (What country are you a citizen of? _____)	
Enrollment Period:	
Quarter: <input type="checkbox"/> I (Sept. 1 -Nov. 30) <input type="checkbox"/> II (Dec. 1 -Feb. 28) <input type="checkbox"/> III (March 1 -May 31) <input type="checkbox"/> IV (June 1 -Aug. 31) Year: _____	

Prior to registration all student holds must be cleared.

Name of Course	Course #Prefix & Section	Days	Time	Start Date	End Date	Contact Hours	Building/ Room #	Cost

Police Academy Only: _____ <small style="margin-left: 100px;">Law Enforcement Agency</small>	TCLEOSE PID # _____
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All students must initially complete questions 1 through 4. Subsequent changes to this information can be made as needed. Please keep your information current each year.
 For Federal, State and Local Reporting Purposes **(Please check one:)**

1. Highest level of education: No high school Some high school High school diploma/GED Associate's Bachelor Degree Graduate/Professional Degree
2. Ethnic Background: Hispanic White, Non-Hispanic American Indian or Alaskan Native Black, Non-Hispanic Asian or Pacific Islander Non-Resident Alien/Foreign National Other
3. Gender: Male Female
4. Family's gross taxed and untaxed income? Less than \$20,000 \$20,000 - \$39,999 \$40,000 - \$59,999 \$60,000 - \$79,000 more than \$80,000

This information is voluntary and will be used in a nondiscriminatory manner, consistent with applicable civil rights laws. This information will be used for federal state and/or local law reporting Continuing Education Workforce programs and purposes only and will not be used in any admission or assistance decisions.

 Signature Date

Important: Student is NOT considered registered until full payment is received. No refund is available after the first class meeting.



Laredo Community College

West End Washington St. • 5500 South Zapata Highway • Laredo, TX www.laredo.edu

Continuing Education - (956) 721-5374 or (956) 794-4520

Drop off your completed registration form at:

Ft. McIntosh Campus
Admissions/Registrar's Office
in Memorial Hall Building, Room 125.

For additional information, please call the
Continuing Education Department
at (956) 721-5374

South Campus
Admissions/Registrar's Office
located at the
Billy Hall Student Center.

For additional information, please call the
Continuing Education Department
at (956) 794-4520