

Registration/Add/Drop Form

Student Information

Registration Period Fall Spring Summer Year 20__ Student ID# _____

Legal Name Please Print _____ Soc. Sec# _____ - _____ - _____
Last First M.I.

Mailing Address _____

City _____ State _____ Zip _____

Home Phone () _____ Cell Phone () _____

Birth Date ____ / ____ / ____ email Address _____

Is this a new address and/or phone number? Yes ___ No ___

Are you a Dual Enrollment Student? Yes No If so, please print the name of your high school _____

The following information is voluntary and has no impact on the registration process. The information will be used, in anonymity, to report the diversity of YCCC on mandatory federal reports.

Gender: Female Male

Ethnicity/Race: Are you Hispanic or Latino? Yes No Select one or more of the following races: American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander White

Course Registration

Registration is not complete until this form is submitted to Enrollment Services

Codes: A = Add AU = Audit D = Drop

Code	Course Number Example: ENG-101-01-LB
	- - -
	- - -
	- - -
	- - -
	- - -

Code	Course Number Example: ENG-101-01-LB
	- - -
	- - -
Notes:	

Payment Information

Payment: A financial obligation exists once you have registered for classes. Financial arrangements with the business office must be completed by the payment due date. If you decide not to attend these classes, a drop registration form must be filled out to reverse the charges on your account. Refunds are date sensitive and are made in accordance with the MCCS Policy No. 402, YCCC Policy No. 6.21 and 6.22, and Federal Regulations regarding Title IV recipients as noted in the YCCC Student Handbook and Catalog.

Payment Method: CASH CHECK VISA MC DISCOVER FINANCIAL AID DUAL ENROLLMENT OTHER

Card# _____ Exp Date: _____

Company guaranteeing payment (must attach supporting documentation): _____

FERPA: YCCC considers as public information the following items and will release them to persons requesting the information unless students request us not to do so: student name, class, major, home address, home telephone number, email address, enrollment status, dates of attendance, and graduation date. You may request that all such information be suppressed.

Accommodations: Reasonable accommodations are available to qualifying individuals upon request by contacting the Office of Students with Disabilities.

Advisor or Dept. Chair Signatures: Students are ultimately responsible for course selection according to the catalog specifications set at time of acceptance. YCCC recommends that students consult with their advisor in planning course selection to ensure that prerequisites and graduation requirements are met. It will be assumed the student has waived the advisor consultation if the form is received without an advisor signature. Students shall be withdrawn from a course for not meeting a course prerequisite.

Student Signature Date Advisor or Dept. Chair Signature Date

York County Community College is an equal opportunity/affirmative action institution and employer.
 For more information, please call 207.216.4435