

**Kilgore College Course Registration Form for Continuing Education**  
**KILGORE COLLEGE RISK MANAGEMENT INSTITUTE**  
**WORKFORCE DEVELOPMENT**  
**REGISTRATION FORM**

Date: \_\_\_\_\_ Student ID#: \_\_\_\_\_ - \_\_\_\_\_  
(Assigned by Kilgore College)

SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ *In order to help us protect your Social Security number, the college computer system will convert your SS# into your student ID# for your record.*

Name: \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Business or Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Company Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Email: \_\_\_\_\_

Gender: \_\_\_ Male \_\_\_ Female Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

*Colleges and universities are asked by many, including the federal government, accrediting associations, college guides, newspapers, and our own college/university communities, to describe the racial/ethnic backgrounds of our students and employees. In order to respond to these requests, we ask you to answer the following two questions:*

1. Are you Hispanic or Latino? (Are you a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race?)  
\_\_\_ Yes \_\_\_ No
  
2. Please select the racial or other category or categories with which you most closely identify. Check as many as apply:  
\_\_\_ White  
\_\_\_ Black or African American  
\_\_\_ Asian  
\_\_\_ American Indian or Alaska Native  
\_\_\_ International or Non-Resident  
\_\_\_ Native Hawaiian or Other Pacific Islander
  
3. May we Contact you about other classes: \_\_\_ Yes \_\_\_ No
  
4. How did you hear of this class (check all that apply)?  
\_\_\_ printed brochure; \_\_\_ e-mail; \_\_\_ newspaper; \_\_\_ word-of-mouth; \_\_\_ mailing;  
\_\_\_ business expo or job fair; \_\_\_ attended previous Risk Management Institute class

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Course Name \_\_\_\_\_ Date \_\_\_\_\_

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Course Name \_\_\_\_\_ Date \_\_\_\_\_