

Kilgore College Course Registration Form

For Continuing Education and Workforce Development

Registration will be accepted only if class space is available when it is received. Payment is due at registration.

Date: _____

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.

Student ID #: _____

Name: _____
(Last Name) (First Name) (Middle Initial)

Mailing Address: _____ County: _____

City: _____ State: _____ Zip: _____

Home Phone _____ Business or Cell Phone: _____

Email: _____

Date of Birth: _____ / _____ / _____

Gender: _____ Male _____ Female

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 category or categories with which you most closely identify. Check as many as apply:

_____ American Indian or Alaska Native
_____ Asian
_____ Black or African American
_____ Native Hawaiian or Other Pacific Islander
_____ White

Course Name	Course Number	Start Date	Tuition
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