SkillUP

REGISTRATION FORM PLEASE PRINT

(Some programs of study require a social security number in order to comply with Admission's background check and drug testing requirements.)

Today's date:						
STUDENT INFORMATION						
Last name:		First:		Middle:	Birth date: / /	Age:	Gender: ❑ M ❑ F
Street address:				City:	State, ZIP Code:		
Contact phone #:			Social Security#:	Email address:			
Ethnicity: ❑ Black, Non-Hispanic ❑ American Indian/Alaskan Native ❑ Asian/Pacific ❑ Hispanic ❑ White, Non-Hispanic ❑ Other			Are you of Hispanic/Latino origin? ❑ Yes ❑ No	Are you a US Citizen? ❑ Yes ❑ No ❑ No, but work authorized			

MILITARY/DISABILITY/EMPLOYMENT/SCHOOL INFORMATION

DISABILITY INFORMATION						
Are you disabled?	❑ Yes ❑ No	If yes, what percent?				

EMPLOYMENT INFORMATION	
Are you currently employed? ❑ Yes ❑ No	If yes what is your employer's name?
If yes, what is your occupation? _____	What is your current monthly gross earnings? $
If no, what is your career/employment goal?	

MILITARY INFORMATION				
Have you completed your Selective Service Registration? ❑ Yes ❑ No ❑ Not Applicable				
Are you a US Military Veteran? ❑ Yes ❑ No	Branch of Military Service	From (dates) / /	To (dates) / /	Are You a Spouse to a Veteran? ❑ Yes ❑ No

SCHOOL INFORMATION	
What program/field of study are you interested in?	Highest Educational Level Completed:
What is your educational goal? ❑ Non-credit certificate completions ❑ Credit 1 year certificate ❑ Credit less than 1 year certificate	❑ Less than HS Diploma/ no GED ❑ HS Diploma/GED ❑ Some College, no degree ❑ Completed AA/AAS degree ❑ Bachelor's Degree ❑ Graduate Study above Bachelor's

Verify Status	❑ Full Time ❑ Part Time ❑ Non Credit Student	Credit accepted for prior learning	❑ Yes ❑ No Credits:_____	

Assessment Scores	Date Taken		Source: ❑Accuplacer ❑ ACT ❑ WorkKeys/NCRC ❑ Other	
Reading Score		Level: ❑College Level ❑One Level Below ❑ Two Levels Below ❑Three Levels Below	• Refer to ACCUPLACER Placement Guide for Levels	
English Score		Level: ❑College Level ❑One Level Below ❑ Two Levels Below ❑Three Levels Below		
Math Score		Level: ❑College Level ❑One Level Below ❑ Two Levels Below ❑Three Levels Below		

Campus Code		Program Code		Term Code		Semester Start Date	
Credit/Non Credit Code			Entering Student Status	❑ New, first-time any college ❑ Previously attended any college ❑ Returning student from current college		Term Credit Hours Attempted:	
						Term GPA:	
						Term Credit Hours Completed:	

Pre WorkKeys Assessment	Date Taken:		
Applied Math	Score: ❑ 3 ❑ 6 ❑ 4 ❑ 7 ❑ 5	❑Transitions Course ❑AAS Health Information Management ❑ Certificate ❑CMT program	
Reading for Information	Score: ❑ 3 ❑ 6 ❑ 4 ❑ 7 ❑ 5		
Locating Information	Score: ❑ 3 ❑ 6 ❑ 4 ❑ 5		

EXIT USE

Exit Date from Program:			

Post WorkKeys Assessment	Date Taken:	Program Completed	
Applied Math	Score: ❑ 3 ❑ 6 ❑ 4 ❑ 7 ❑ 5	❑Transitions Course ❑AAS Health Information Management ❑ Certificate ❑CMT program	
Reading for Information	Score: ❑ 3 ❑ 6 ❑ 4 ❑ 7 ❑ 5		

Locating Information	Score: ❏ 3 ❏ 6 ❏ 4 ❏ 5		