

Application for registration

(non-degree seeking)

To apply as a degree-seeking student, please visit go.wncc.edu/apply

wncc.edu

<u>Return to</u>: WNCC Admissions Office 1601 E. 27th Street Scottsbluff, NE 69361 <u>admissions@wncc.edu</u> 308.635.6010 *or* 800.348.4435

Type or print answers to all items

Student Information

Full Name:									
	Last		First	Mide	lle		Previous/Maiden	Last Name(s)	
Social Security ∦:			* Date of Birth:			Gender:	Male Fei	nale 🗌 Otl	her/prefer
,				Month/Day/M	Tear			not	to answer
Mailing Address:									
_		Street			City		State	ZIP	
Phone #:			Pł	none Type: 🗌 Cell	Home	e 🗌 Work	Is it ok to tex	t you? 🗌 Ye	es 🗌 No
Alternate Phone ∦:			En	nail:					

*You are advised to enter your SSN to be able to register for classes. WNCC will not disd ose your SSN without your consent unless it is required to do so by law. If you do not have an SSN or are unable to provide one, please contact the Registrar's Office at registrar@wncc.edu.

Colleges are asked by many entities, including the federal government, accrediting associations, college guides, new spapers, and our own communities, to describe the ethnic/racial backgrounds of our students and employees. In order to respond to these requests, please answer the following two questions:

Race/ethnicity: Do you consider yourself to be Hispanic/Latino?

- No, not Hispanic or Latino
- Yes, Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)

In addition, please select one or more of the following to describe yourself:

- American Indian or Alaska Native (A person having origins in any of the original peoples of North and South America [including Central America], and who maintains tribal affiliation or community attachment)
- Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippines, Thailand, or Vietnam)
- Black or African American (A personhaving origins in any of the black racial groups of Africa)
- Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)
- White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

Disability Services

Would you like to receive information about services available for students with any kind of disability?

Emergency Contact Information					
Emergency Contact:					
	Name	Relationship	Phone #		
Residency Status					
Nebraska Resident:* [Yes No If Yes, how lo	ng have you lived in Nebraska? 🗌 Six n	nonths or more 🗌 Less than six months		
Out-of-State Resident:	Yes No If Yes, what	state? How long?	onths or more 🗌 Less than six months		
*Answering "Yes" to the reside residency documentation to der	5 L 5	qualify you for in-state tuition purposes. WNCC rese	rves the right to require any applicant to submit		

Student Status					
Are you a first-generation college student?	her)				
Are you a U.S. Veteran? Yes No	Are you a single parent?	Yes	No		
Educational Information					
High School (or equivalent) completion?	☐ High School graduat ☐ GED/HiSET graduat		Currently attending hi Other:	0	
Name/Location of High School:					
Graduation date or equivalency completion date:					
Which term do you plan to begin attending	Fall (August-December) Spri	ng (January–May) 🗌 Su	mmer (June-August)	
Academic Year: Campus: Alliance Scottsbluff Sidney Online					
Course Information (please complete as much as you can about the class(es) you are interested in)					
Course/	Credit(s) Time	Dav(s)	Instructor	Audit? Y/N	

section #	Course Name	Credit(s)	Time	Day(s)	Instructor	Audit? Y/N
						Yes No
						Yes No
						Yes No
						Yes No

Disclosures and Signature

I understand:

- I am responsible for all charges incurred once I am registered in classes at Western Nebraska Community College, unless my tuition is being paid by a sponsorship, scholarship, or other outside assistance.
- I am not eligible for federal financial aid for this class or classes.
- I am not assigned an academic advisor.
- I am responsible for making changes to my schedule in accordance with the WNCC add/drop/withdrawal and refund policies.
- As a WNCC student I am eligible to access tutoring programs.
- If in the future I wish to pursue a degree at WNCC, I must complete the regular admissions process at go.wncc.edu/apply.

Student Authorization

I certify that all information on this application is complete and accurate and I agree to abide by the policies and regulations of Western Nebraska Community College. I understand that I am responsible for my own enrollment and for adhering to all published WNCC deadlines. I also understand that all grades earned at WNCC become a part of my permanent academic record. I acknowledge that after I receive notification that my registration form has been processed, all official communications from WNCC will henceforth be sent to my WNCC email account.

Student signature	Date			
re you under 19 years of age? 🗌 Yes 🗌 No 🛛 If "Yes," ple	ease provide parent/guardian printed name, contact info, and signature:			
Print parent/guardian name	Parent/guardian contact phone/email			

vestern webraska Community College does not discriminate on the basis of race, color, religion, national origin, sex or gender, age disability, marital status, military veteran status, sexual orientation, gender expression/identity, or political affiliation, in its policies, practices, and activities related to employment, admissions, educational services/programming, student services/activities, or financial aid as expressly prescribed by institutional policy, state, and federal laws, regulations, and executive orders.