

# CONTINUING EDUCATION

P.O. Box 398 Kenansville, North Carolina 28349/ www.jamessprunt.edu

## STUDENT REGISTRATION FORM

CLASS TITLE: \_\_\_\_\_ CID NUMBER: \_\_\_\_\_

CLASS START DATE: \_\_\_\_\_ STUDENT ENTRY DATE: \_\_\_\_\_ TERM: \_\_\_\_\_

SOCIAL SECURITY NUMBER: 

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1. LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

2. ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

3. COUNTY (Residence): \_\_\_\_\_ 4. EMAIL ADDRESS: \_\_\_\_\_

5. HOME PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_ BUSINESS PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_

6. BIRTH DATE: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  (Check Here If Senior Citizen-65 or older as of today's date)

7. ARE YOU HISPANIC/LATINO? \_\_\_\_\_ YES (HIS) \_\_\_\_\_ NO (NHS)

8. RACE (Check one): 

	<i>White</i>		<i>Black</i>		<i>Indian</i>		<i>Asian</i>		<i>Hawaiian</i>		
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9. SEX (Check one): 

	<i>Male</i>		<i>Female</i>
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10. CHECK ANY OR ALL THAT APPLY:

<i>Paid Fireman</i>	<i>Volunteer Fireman</i>	<i>Human Resources Dev. (HRD)</i>
<i>Paid Rescue Sq.</i>	<i>Volunteer Rescue Sq.</i>	<i>JSCC Full-Time Employee</i>
<i>Paid Law Enforce.</i>	<i>Inmate</i>	<i>Senior Citizen</i>

11. EMPLOYMENT STATUS (Check one):

<i>Retired</i>	<i>Unemployed-Not Seeking</i>	<i>Unemployed-Seeking</i>
<i>Full time</i>	<i>Part-Time-Number of Hours Per Week _____</i>	

12. EDUCATION LEVEL (Check only one):

<i>Completed High School</i>	<i>Adult High School Diploma</i>	<i>GED Diploma</i>
<i>One-Year Vocational Diploma</i>	<i>Associate Degree</i>	<i>Bachelor's Degree</i>
<i>Master's Degree</i>	<b>OR</b> <i>-Highest Grade Completed _____</i>	

13. CITIZENSHIP (Check one):

<i>U.S Citizen</i>	<i>Permanent Resident Alien</i>	<i>Non-Immigrant Alien</i>	<i>Other</i>
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14. JOB TITLE / EMPLOYER: \_\_\_\_\_

15. STUDENT SIGNATURE: \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

### COURSE RECEIPT

\$ \_\_\_\_\_ Registration Fee Received  
\$ \_\_\_\_\_ Book / Other Fee Received  
\$ \_\_\_\_\_ Other (explain) \_\_\_\_\_

If student is exempted from registration fee, please state reason.  
\_\_\_\_\_  
\_\_\_\_\_

Received By: \_\_\_\_\_ Date: \_\_\_\_\_