

REGISTRATION FORM

MxCC REV 03/20

MIDDLESEX COMMUNITY COLLEGE

STATE OF CONNECTICUT

STUDENT ID: @	THIS REGISTRATION IS FOR: <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER <input type="checkbox"/> INTERSESSION YEAR _____	SOCIAL SECURITY # <i>If you're emailing this form, do not include SSN. If it's required, you'll be contacted.</i>
NAME: LAST FIRST MAIDEN NAME OR MIDDLE INITIAL		
ADDRESS (NO. AND STREET) <input type="checkbox"/> PLEASE CHECK HERE IF CHANGE OF ADDRESS		
CITY/TOWN	STATE	ZIP CODE
		PHONE: HOME
		PHONE: CELL
EMAIL ADDRESS <input type="checkbox"/> PLEASE CHECK HERE IF CHANGE OF EMAIL ADDRESS		
DATE OF BIRTH / /	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	US VETERAN <input type="checkbox"/> YES <input type="checkbox"/> NO
STUDENT STATUS: <input type="checkbox"/> NEW <input type="checkbox"/> CONTINUING <input type="checkbox"/> READMIT		
SEMESTER LAST ATTENDED: <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER <input type="checkbox"/> INTERSESSION YEAR _____		

OFFICE USE ONLY
DO NOT WRITE IN THIS SPACE

CPE Employee Waiver

High School Partnership Non-Credit

Platt High School Seat Senior Citizen

Veteran: 31 33 1606 DD214

N/C 3rd Party Funding Source: _____

If you're emailing this form, do not include credit card number. If it's required, you'll be contacted.

CREDIT CARD#

EXPIRATION DATE & CVV# _____

SIGNATURE _____

CRN#	DEPT & COURSE #	COURSE TITLE	# OF CREDITS	TIME FROM – TO	DAYS	ROOM
				—	MTWRFSS	
				—	MTWRFSS	
				—	MTWRFSS	
				—	MTWRFSS	
				—	MTWRFSS	
				—	MTWRFSS	
				—	MTWRFSS	
				—	MTWRFSS	
				—	MTWRFSS	

The student meets the prerequisites required for the above course(s) by presenting ACT/AP/SAT Scores, Placement Scores, or Unofficial Transcript.

Please list CRNs: _____ Advisor Initials: _____

Once this registration is processed, you are responsible for the charges associated with registration. Detailed information about this and other College Policies can be found in the MxCC College Catalog on our website. It is the responsibility of each student to read the policies of Middlesex Community College. The student's signature on this form is acknowledgement of receipt of this statement and acceptance of the terms and conditions of all policies.

TODAY'S DATE	ADVISOR'S SIGNATURE	TOTAL CREDITS	STUDENT'S SIGNATURE
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DISTRIBUTION: White – Enrollment Services Office Pink - Business Office