

MILWAUKEE AREA TECHNICAL COLLEGE — REGISTRATION FORM

Please Print

SOCIAL SECURITY NUMBER	STUDENT ID NO.	LAST NAME	DATE OF BIRTH
		FIRST NAME	
		MIDDLE INITIAL	
		FORMER NAME	

Mailing Address

STREET AND ADDRESS		CITY/TOWNSHIP/VILLAGE		STATE	ZIP CODE
TELEPHONE (HOME)	TELEPHONE (WORK)	CELL PHONE	E-MAIL ADDRESS		
() - -	() - -				

Permanent Address

STREET AND ADDRESS	APARTMENT NO.	CITY/TOWNSHIP/VILLAGE	COUNTY	STATE	ZIP CODE	FOREIGN COUNTRY
--------------------	---------------	-----------------------	--------	-------	----------	-----------------

Education Background

LAST HIGH SCHOOL ATTENDED	CITY	STATE	MONTH AND YEAR GRADUATED
---------------------------	------	-------	--------------------------

Ethnic Origins (please check one):

American Indian/Alaskan Native Asian/Pacific Islander Native Hawaiian/Pacific Islander
 Black (African-American) Hispanic White

Gender (Please check one):

Male Female

Highest Grade Completed at Entry: (check one)

- 00 Did Not Attend
- 01 (1st Grade)
- 02 (2nd Grade)
- 03 (3rd Grade)
- 04 (4th Grade)
- 05 (5th Grade)
- 06 (6th Grade)
- 07 (7th Grade)
- 08 (8th Grade)
- 09 (9th Grade)
- 10 (10th Grade)
- 11 (11th Grade)
- 12 (12th Grade)
- 13 (13th Grade)
- 14 (14th Grade)
- 15 (15th Grade)
- 16 (16th Grade)
- 17 (17th Grade and above)

Work Status at Enrollment: (check one)

- 01 Employed Full Time
- 02 Employed Part Time
- 03 Underemployed
- 04 Unemployed, Seeking
- 05 Not in Labor Market
- 06 Dislocated Worker

Disability: (check one)

- ND Not Disabled
- DI Disabled (Primary Disability Not Identified)
- AU Autistic
- BI Traumatic Brain Injury
- DB Deaf - Blind
- DF Deaf
- ED Emotional Disability
- HH Hard of Hearing
- LD Specific Learning Disability
- MH Multi Disabled
- MI Mentally Handicapped
- MU Speech or Language Impaired
- OI Orthopedic Disability
- OT Other Health Impaired
- VI Visually Impaired

Single Parent: (check one)

You are unmarried or legally separated, and you have custody of one or more minor children or you are pregnant. Yes ___ No ___

Displaced Homemaker: (check one)

- You are an adult and have worked at home without pay to care for your family and you are no longer supported by a relative's income, OR
- Your youngest dependent child will become ineligible for TANF (AFDC) assistance within two years, and you are unemployed or underemployed. Yes ___ No ___

If you are not a U.S. Citizen, please provide:

Visa Type _____
 Visa No. _____

What motivated you the most to register for class this semester? (Circle the most appropriate number.)

1. Interest in the course subject
2. Desire to complete my associate, diploma or apprentice program
3. Want to get a job (or a better job)
4. Interest in a certificate
5. Need to expand my job skills
6. Wish to improve language, reading or math skills
7. Work on my GED or high school diploma
8. Transfer credits to a 4-year college
9. Transfer credits to a 2-year college

Which of these influenced you to register this semester? (Circle all numbers that apply.)

1. Convenience of location or time of classes
2. Inexpensive coursework here
3. Financial support for the term
4. Class schedule for the term
5. MATC Catalog with programs and courses
6. Teacher, recruiter or counselor
7. Family member or friend
8. TV, radio or print advertising
9. MATC website

98 Foreign Student Equivalent Grade Not Available

12 GED/HSED _____ Year Received

MILWAUKEE AREA TECHNICAL COLLEGE — REGISTRATION FORM, Part 2

Please Print

Term*	Synonym No.	Subject ID	Course No.	Section No.	Course Title	Location	Days	Time	Credits	\$ Fee
SP	72911	SUSTN	100	600A	Sustainable Facilities Operations	South	Mon	5:45 pm 9:40 pm	3	\$334.82

LIST AN ALTERNATE CLASS, IN CASE THE CLASS YOU WANT IS UNAVAILABLE.

Term*	Synonym No.	Subject ID	Course No.	Section No.	Course Title	Location	Days	Time	Credits	\$ Fee

* Fall = FA, Spring = SP, Summer = SU

Total Amount

Enrollment Status

0-5 Credits = Less than half time
 6-11 Credits = Half time
 12+ Credits = Full time

Program Code _____

Cash
 Visa MasterCard Discover
 Card Number: _____ Expiration Date: _____
 Signature: _____

(Over)