SUNY Ulster

NONCREDIT REGISTRATION

ULSTER COUNTY COMMUNITY COLLEGE

BUSINESS RESOURCE CENTER
ONE DEVELOPMENT COURT, KINGSTON NY 12401
(845) 339-2025 • FAX (845) 339-0780

NAME - PLEASE PRINT			STUDENT I.D. NUMBER
LAST	FIRST	M.I.	

PERMANENT HOME ADDRESS				
STREET	CITY	STATE	ZIP CODE	COUNTY

HOME PHONE	CELL PHONE	BUSINESS PHONE		
Area Code	Area Code	Area Code	EVER TAKEN ANY COURSE AT UCCC? Y N	MAIDEN or PREVIOUS LAST NAME

TODAY'S DATE / /	EMAIL ADDRESS	GENDER ☐ M ☐ F	DATE OF BIRTH / /

LIST BELOW COURSES YOU ARE REGISTERING FOR - SEE SCHEDULE BROCHURE FOR COURSE CODES, START DATES AND COURSE FEES

OFFICE USE	Course Code	Course Title	Course Start Date	Course Fee
	A UNIT OF THE STATE UNIVERSITY OF NEW YORK • AN AFFIRMATIVE ACTION / EQUAL OPPORTUNITY COLLEGE		Total $	

PAYMENT METHOD: ☐ Cash ☐ Check ☐ Money Order ☐ Credit Card ☐ Purchase Order ☐ Voucher

PAYMENT IN FULL DUE WITH REGISTRATION

Payment Details

☐ Cash ☐ MasterCard

☐ Check ☐ Visa

☐ Money Order ☐ Discover

Make checks / money orders payable to **UCCC**

Credit Card Number - Print Clearly

Exp. Date

CVC Code

Cardholder Name (as it appears on card): _____

Billing Street Address: _____ Billing Zip Code: _____

Ethnic and disabled student information: New York State Department & U.S. Office of Education require all colleges to collect and report minority and disabled student enrollments. This information is voluntary and there is no penalty for refusal to answer.

Are you Hispanic/Latino ❑ Yes ❑ No

If Hispanic, your background (select one):

- ❑ Central American
- ❑ Dominican
- ❑ Mexican
- ❑ Puerto Rican
- ❑ South American
- ❑ Other Hispanic/Latino

Are you: (Check all that apply)

- ❑ White
- ❑ Black or African American
- ❑ Asian
- ❑ American Indian or Alaska Native
- ❑ Native Hawaiian or Other Pacific Islander
- ❑ Non-Resident Alien

Do you have a disabling condition? ❑ Yes ❑ No

Are you a veteran? ❑ Yes ❑ No

WHITE COPY: NON-CREDIT REGISTRAR YELLOW: STUDENT ACCOUNTS PINK: STUDENT