REGISTRATION **FORM**



h.

| Please use one registration form per student. Duplicate this form as needed. 2. Pl This form will be used to update your contact information. 1 For name change requests, contact the Registration Office/Answer Center at 734-462-4426. 1 | | | | | you Hispanic? ☐ Yes ☐ No ase select all that apply: merican Indian or Alaska Native sian ☐ Black or African American lative Hawaiian or Other Pacific Islander white Male ☐ Female ☐ Non-binary | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| DATE OF BIRTH | | STUDENT NUMBER (WILL BE ASSIGNED TO FIRST-TIME STUDENTS) | | | | , |
| | | FIRST NAME | MI/FORMER NAME | | | |
| NUMBER AND STREET | | | CITY | | STATE | ZIP CODE |
| EMAIL ADDRESS | | DAY PHONE | EVENING PHONE | | MOBILE PHON | E |
| Section No. | CES, CES2, CESN NO. | | Amount | | | |
| | | | | | \$\$ | |
| | | | | | \$ | |
| | | | | | \$ | |
| | | | | | \$ | |
| | | | | | . \$ | |
| | | | | | . \$ | |
| | | a Physical Fitness class, revie ur registration signifies agreer | w waiver online at schoolcraft.edu/ppl. nent to the waiver terms. | TOTAL | .: \$ | |

□ Enclosed is my Check/Money Order payable to Schoolcraft College. (If your check is returned because of insufficient funds, we may redeposit it electronically.)

If paying by credit card, register online at schoolcraft.edu/ocelotaccess or call the Answer Center Monday – Friday, 8 a.m. – 5 p.m. at 734-462-4426 to register and pay by phone.

| Mail to: Schoolcraft College PPL Registration 18600 Haggerty Road Livonia, MI 48152-2696 | Company-paid tuition: Please send a copy of your purchase order when you register. Co. Name Co. Address Billing Contact Person PO# | For office use only: |
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