## REGISTRATION FORM



Registration/Admission Form				<ol> <li>Are you Hispanic? ☐ Yes ☐ No</li> <li>Please select one or more races:</li> </ol>	
This form will be	used to upd	per student. Duplicate this form as need ate your contact information. In the Registration Office/Answer Cente	Prot 724 4/2 442/ ☐ America ☐ Asian ☐	ect one or more races: an Indian or Alaska Native <b>]</b> Black or African American Hawaiian or Other Pacific Islander	
DATE OF BIRTH		NT NUMBER ssigned to first-time students.	□ Male □ Fe	male In Non-binary	
LAST NAME		FIRST NAME	MI/FORMER NAME		
NUMBER AND STREET	1 1	CITY			
STATE ZIP CODE	EMAIL AD	DRESS			
-	-		- -		
DAY PHONE		EVENING PHONE	CELL PHONE		
Section No.	CES, CES2, CESN No.	Title of Class	Amount		
			\$		
			1	1	
			\$		
			\$ <u> </u>		
			\$	     	
			\$	     	
			\$		
			\$		
			\$		
			\$		

Email to:

SCECH@Schoolcraft.edu

Submission deadline: December 23, 2022

All forms received after deadline will not be processed and will not

receive SCECH