## **Adult Ed Enrollment Registration Form**



Date Entered: \_

## STATE CENTER COMMUNITY COLLEGE DISTRICT

ESNO • REEDLEY • MADERA • OAKHURST • CLOVIS



Step	1: Student I	nformation						
Name:Adult School:			College Student ID #:					
			College Campus					
l am	submitting th	nis approval form for	the following:	Year 20	fcc/rc/ccc/ □ Fall [	<sup>мсс/ос</sup> ⊐ <b>Spring   □ Summe</b> r	r	
	_	nool Approval	_	-				
	Course #	Course Title	Units		Course #	Course Title	Units	
EX	12345	ENGL-1A	4					
1.				3.				
2.				4.				
certif	icate. (SB 554)					h school diploma or equiv		
Adult	Adult School Counselor Signature:				Print Name:			
			t Phone:					
	All SCCCD Adultication published in the ensure you have Grades: By parearn in your SC Students partice GPA of 2.0 and after graduatin I understand the my written conform may be of I understand the Accommodation of I you are a student accommodation.	e FCC/RC/CCC/MCC cata ye a successful experience ticipating in an Adult Ec CCD class(es) will becom- cipating in Adult Education completion of 51% of co- ing from adult school. nat under Section 49061 issent. (Family Educations betained at Admissions & here is an eleven (11) uni- tions for students with disa- dent with a documented in a community College), a	dents are responsibilities are responsibilities are sponsible of the Education College of the Education College sponses attempted)  of the Education Colleges attempted)  of the Education Colleges and Prival Records.  it limit.  abilities are, by registed disability (i.e., IEF lege course, contains)	cole for cor le(s) of da courses you fficial coll must mak to mainta Code, my cy Act [FE gulation, do P, 504 pla ct Disable	mplying with the asses. Please reviews are creating a ege academic release satisfactory academic field by the college records with the college rec	rules and regulations of t ew these rules and regula college transcript. The g	rade(s) you m cumulative egin college yone without information chool classes out s) at	
						safety, preparedness of t 800-48802, 76001, 76300		
Student Signature: Print			Print N	ame:		Date:		
		ly: / (11-unit maximum) ☐ Signature: d STMC ASPI		_		Date:		

Please Print