



**TERM IN WHICH COURSE(S) OFFERED:**  
 FALL (Term 1)  
 WINTER (Term 2)  
 SUMMER (Term 3)

**NON-CREDIT COURSE  
 REGISTRATION / APPLICATION**

MAIL TO: Registrar  
 Broward College  
 225 East Las Olas Blvd., Fort Lauderdale, FL 33301

BROWARD COLLEGE EMPLOYEE \_\_\_\_\_ DATE \_\_\_\_\_

TERM/SESSION \_\_\_\_\_ FEE CARD NO. \_\_\_\_\_

Name (last, first, middle) \_\_\_\_\_ Social Security Number \_\_\_\_\_

Street Address \_\_\_\_\_ City/County/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ e-mail address \_\_\_\_\_

Birth Date (month/date/year) \_\_\_\_\_ Sex  Male  Female High School/GED graduate  Yes  No Date \_\_\_\_\_

Location  A. Hugh Adams Central  North  Judson A. Samuels South  Willis Holcombe Center  Health Sciences  Commercial  Pines Center  Other \_\_\_\_\_

Current or returning (within one year) BCC student  Never attended BCC classes or attended more than one year ago.

Health Professions (Clinical Lab, Dental, Nursing, Psychological Services, Radiology, Respiratory, etc.) \_\_\_\_\_

License Certifications Number (JC , RN, RT, etc.) \_\_\_\_\_

Race/Ethnic Data (required for reporting purposes)  American Indian/Alaskan Native  Asian/Pacific Islander  Black (not of Hispanic origin)  
 Cuban National  Hispanic  White (not of Hispanic Origin)

Immigration Status:  U.S. Citizen  Resident Immigrant Alien A No. \_\_\_\_\_  Non Resident Immigrant Alien

I certify that I qualify as a Florida resident for tuition purposes and that I have resided in Florida as a permanent resident for the past twelve months or longer. (Residency qualifications are found in the College Catalog) **OR**

I have not resided in Florida as a permanent resident for the past twelve months.

I declare under penalty of perjury punishable by law as a misdemeanor under Section 837.06 F.S. that the foregoing is true and correct.

Signature (Student or parent if applicant is under 18) \_\_\_\_\_ Date \_\_\_\_\_

**REGISTRATION**

REFERENCE NO.	COURSE NO.	COURSE TITLE	DAY	TIME	FEE

**NOTE: Make check or money order payable to Broward College. Write your Social Security number on the face of your check.** Cash payment can be accepted only if you register in person. Fees are refundable if the college cancels a class, or if you officially withdraw through an Office of the Registrar of the college on or before the date of the scheduled class meeting. For courses that only meet for one or two days, withdrawal must be prior to the first class day. **TOTAL \$** \_\_\_\_\_