

Student Information
Shaded Areas Required

Last Name	First Name	M. I.	Maiden Name
Mailing Address	City	State	Zip Code County
Primary Phone	Secondary Phone	Business Phone	
Date of Birth (MM/DD/YYYY)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Student ID#	
Are you a full time NC resident? Yes <input type="checkbox"/> No <input type="checkbox"/>	High School Name	Employment Status	
Ethnic Origin <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic	Check the highest grade completed 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>	<input type="checkbox"/> Retired (R) <input type="checkbox"/> Unemployed – not seeking (UN) <input type="checkbox"/> Unemployed Seeking (US) <input type="checkbox"/> Employed 1 – 10 Hours (E1) <input type="checkbox"/> Employed 11 – 20 Hours (E2) <input type="checkbox"/> Employed 21 – 39 Hours (E3) <input type="checkbox"/> Employed 40 or more hours per week (E4)	
Select One or More Races: <input type="checkbox"/> American/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Hawaiian/Pacific Islander <input type="checkbox"/> White Prefer not to disclose	High School Graduation Date <input type="checkbox"/> GED <input type="checkbox"/> Adult High School <input type="checkbox"/> 1-Year Vocational Diploma <input type="checkbox"/> Associates Degree <input type="checkbox"/> Bachelor’s Degree <input type="checkbox"/> Master’s Degree or Higher	E-mail Address	

Course Information

Course Number	Course Title	Cost of Class	Fees
Dates	Times (Specify AM or PM)	Location	Days (Check all that apply) M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sa <input type="checkbox"/> Su <input type="checkbox"/>

SIGNATURE: _____

DATE: _____

By signing this form, student agrees the information above is true and accurate and the legal residence given for tuition purposes is as shown. Student agrees to abide by the HCC Policies and Procedures and the Student Code of Conduct. Unprofessional behavior can place student’s participation in jeopardy and will be viewed as grounds for dismissal. A complete guide to conduct can be viewed here: http://www.haywood.edu/policies_and_procedures/policy/6/7 Student agrees to allow HCC to publish photographs, video footage and personal information pertaining to news releases or other publications or media normally considered to be that of a two-year college unless a disclaimer has been filed with the Director of Enrollment Management.

Please turn the page over to complete the registration form 

Creative Arts Student Registration

Supplemental Student Accident Insurance

As a registered student of a Continuing Education Course you have the option of purchasing Supplemental Student Accident Insurance for \$1.25 per semester.

TERM I Jan-1-May15

TERM II May 16-Aug 15

TERM III Aug 16-Dec. 31

Yes, I would like to purchase Supplemental Student Accident Insurance

No, I would not like to purchase Student Accident Insurance

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Name: _____

Date: _____ Amount Enclosed \$ _____

Check Money Order Cash

3rd Party Billing (Authorization Required)

Please check all information before mailing. Course number must be accurate to ensure proper placement in class. Send check or money order made payable to Haywood Community College (no cash, please) to:

Creative Arts Mail-In Registration

Haywood Community College

185 Freedlander Drive

Clyde, NC 28721

(828) 565-4152

Fax: 828-627-8396

E-mail: HCC-WCE@haywood.edu

For more information on HCC's Creative Arts Courses please visit our website at:

<https://creativearts.haywood.edu/>

Contact Us

Creative Arts Continuing Education

Aubree Ross

828-565-4152

alross@haywood.edu

Dean of Workforce and Industry

Doug Burchfield

828-564-5128

ddburchfield@haywood.edu