



# Wharton County Junior College

## Continuing Education Admission/Registration Form

Social Security Number *(see note below)		Current Full Legal Last Name		First Name	
Middle Name		Suffix (Jr, III, etc)	Preferred Name (if different from first name):		
Other Names Used					
Current Mailing Address:	Street:		Zip Code:	Home Phone:	
	City:		State:	Cell Number:	
Date of Birth:    /    /		Gender: M <input type="checkbox"/> F <input type="checkbox"/>		Citizenship: Y <input type="checkbox"/> N <input type="checkbox"/> PR <input type="checkbox"/>	
Email Address:					

### Ethnicity and Race:

A) Are you Hispanic or Latino? (A person of Cuban, Mexican, Puerto Rico, South or Central American, or other Spanish culture or origin, regardless of race)  
 YES  NO

B) Please select the racial category or categories with which you most closely identify. Check as many as apply.

- 1 - American Indian or Alaskan Native – A person having origins in any of the original peoples of North or South America (including Central America) who maintain cultural identification through tribal affiliation or community attachment.
- 2 – Asian – A person having origins in any off the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- 3 – Black or African American – A – person having origins in any of the black racial groups of Africa.
- 4 – Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- 5 – White, A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

CRN# (Course Reference Number)	Course Title	Date Begins	Cost
		/ /	
		/ /	

\* Classes are cancelled 3 days prior to first class meeting date when minimum enrollment is not met.

### PAYMENT METHOD

- Check (Make check payable to WCJC, DL# required of signee)     Cash     Charge Card  
 Wharton Co. Jr. College  
 Continuing Education  
 5333 FM 1640  
 Richmond, TX 77469

- MasterCard     Visa     Discover     American Express

Card #: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Expires Date: \_\_\_\_\_ / \_\_\_\_\_

**Fax-In** - Send us your registration form by fax. Payment must accompany registration

**Fax-In Numbers.**    Sugar Land: 281-243-8583

Ft Bend Tech Center: 281-239-1628

The information I have provided is complete and correct to the best of my knowledge. If my application is accepted, I agree to abide by the policies, rules and regulations of Wharton County Junior College. I authorize the College to verify the information I have provided.

Please print the signature name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Students requesting refunds at least **two full business days** prior to the first class meeting shall receive a 100% refund of all tuition and fees unless an earlier refund date is published for an individual course, seminar, workshop, conference, or any other non-credit offering. Refunds will be processed and sent back to the student or student can request refund be applied toward the tuition of another non-credit class.

\*Although entering your Social Security number is optional, providing it will ensure your documents are matched and processed promptly.

\*A current and accurate phone number and e-mail address will ensure swift communication with the college.