Nashua Community College

505 Amherst Street
Nashua, NH 03063
Phone (603) 578-8900 Fax (603) 882-8690

Please Check One:
Matriculated ☐
Non-Matriculated ☐

TERM: _____

REGISTRATION FORM

(Complete all items. Please print clearly and sign in ink at bottom.)

@_____ _____
STUDENT ID # LAST NAME FIRST NAME MIDDLE INITIAL

Prior Name(s):_____ Major: _____

*Social Security #: _____ - _____ - _____ Date of Birth: _____ / _____ / _____

☐ **Check here if this is a change in address, or phone.**

Current Address: _____City_____ State _____ Zip _____

Phone: Home ( ) _____ Work ( ) _____ Cell ( ) _____

(IF LIVED AT CURRENT ADDRESS LESS THAN ONE YEAR)

Previous Address: _____City_____ State _____ Zip _____

* Federal law requires that Nashua Community College (N.C.C.) collect names and corresponding social security numbers for all students attending the college. The college is required by the Internal Revenue Code to produce a 1098-T tax form (26 U.S.C.A. Section 6050 or Federal Register, Vol. 67, No. 2244, page 777686 (ii)) which requires the college to report the names and social security numbers of all students taking credit-bearing courses. Please note, however, that the college will ensure the security of the student's social security number and will not disclose it to anyone outside the college, except as authorized by federal or state laws or applicable policies.

Federal Governmental Statistical Information (Optional):
Sex: ___Female ___ Male **US Citizen:** ___Yes ___No
Ethnic Background: Are you Hispanic or Latino: ____ Yes ____ No
Select one or more races: ____ American Indian / Alaskan _____Asian ____ Black or African American ____ Native Hawaiian / Pacific Islander ____ White

CRN #	Course # and Section	Course / Workshop Title	Comments	Tuition

☐ **I have met any prerequisite and corequisite that may be required for any of the above courses**

Please Note -- You must fulfill your financial obligation two (2) weeks before the beginning of the semester or you will be de-registered from your classes.

Financial Obligation Statement -- I agree that by registering for courses within the Community College System of New Hampshire (CCSNH), I am financially obligated for ALL costs related to the registered course(s). Upon a drop or withdrawal, I agree that I will be responsible for all charges as noted in the student catalog and handbook. I further understand that if I do not make payment in full, my account may be reported to the credit bureau and/or turned over to an outside collection agency. I also agree to pay for the fees of any collection agency, which may be based on a percentage of the debt up to a maximum of 35%, and all additional costs and expenses, including any protested check fees, court filing costs and reasonable attorney's fees, which will add significant costs to my account balance.

Credit Course Refund Policy -- Students who officially withdraw from NCC or an individual course by the end of the fourteenth (14th) calendar day of the semester will receive a 100% refund of tuition, less non-refundable fees. Students in classes that meet in a format shorter than the traditional semester (15-16 weeks) will have seven (7) calendar days from the designated start of the alternative semester to withdraw for a full refund. If the seventh (7th) or fourteenth (14th) calendar day falls on a weekend or holiday, the drop refund date will be the first business day following the weekend or holiday. **Exception:** students in courses that meet for two (2) weeks or fewer must drop by the end of the first (1st) day of the class in order to get a 100% refund.

Registrations will **NOT** be processed if you have an outstanding obligation to NCC. Upon registration, you are enrolled unless otherwise notified. No confirmation will be mailed. Classes are subject to change. Students need to check the NCC website (www.nashuacc.edu) under the Student Information System (SIS) for their classroom location(s), schedule, grades, financial aid information, student email account, etc.

☐ **Students can register or drop courses without an advisor's signature but are responsible for taking courses within their program of study and meet graduation requirements.**

Student Signature: _____ **DATE:** _____ **Advisor Signature:** _____ **DATE:** _____

Parental / Guardian Signature: _____ **DATE:** _____ **(For students under the age of 18 only)**

FOR OFFICE USE ONLY

Date: _____ Entered By: _____

Revised: 06/14 KMB