TOMPKINS CORTLAND COMMUNITY COLLEGE | COLLEGENOW
COLLEGE CREDIT FOR HIGH SCHOOL STUDENTS

CONCURRENT ENROLLMENT COURSE REGISTRATION FORM

The State University of New York

CollegeNow | P.O. Box 139 | 170 North Street
Dryden, NY 13053-0139
Fax: 607.844.6535 | Phone: 607.844.8222, Ext. 4396

PLEASE PROVIDE ALL OF THE INFORMATION. PRINT CLEARLY.

High School (NOT BOCES program) _____ Anticipated Year of High School Graduation _____

Social Security Number _____ Semester (fall/spring/summer) _____ Year _____

Have you taken courses, including Concurrent Enrollment, through Tompkins Cortland Community College before? ☐ Yes ☐ No

Legal Name* (Last, First, M.I.) _____

Date of Birth (Month/Day/Year)_____ Legal Gender * ☐ Male ☐ Female ☐ X

Street Address/P.O. Box _____

City/State/Zip _____ County_____

Email Address_____

(Please note: Your email address will be used only to contact you with College information)

Phone Number _____

Once registered, students have the opportunity to declare preferred name, pronouns, and gender identity by emailing collegenow@tompkinscortland.edu.

Citizenship Information:

☐ U.S. Citizen

☐ Permanent Resident –
Country of citizenship

_____

☐ Not a U.S. Citizen –
Country of citizenship

_____

Visa Type _____

Are you Hispanic/Latino?
☐ Yes ☐ No

If yes, select one or more of the following:

☐ Central American
☐ Cuban
☐ Dominican
☐ Mexican
☐ Puerto Rican
☐ South American
☐ Other Hispanic/Latino

Please indicate your race (select one or more):

☐ American Indian or Alaskan Native
☐ Asian
☐ Black/African American
☐ Native Hawaiian or Other Pacific Islander
☐ White

Course Number/Title	Course Start Time	Office Use Code	School Number	Office Use Only	College Credit	Audit
Sample: ENGL 101 - Academic Writing II	**10:57**	**D**	**15**		**X**	
Sample: BUAD 201 - Business Law I	**10:57**	**D**	**15**			**X**
		D				
		D				
		D				
		D				

College Credit Statement

I understand that I am registering for a college course for which TC3 rules and regulations will be in effect. My signature below certifies that I have chosen to enroll in one or more courses (as indicated above) for college credit.

_____
Student Signature

_____
High School Instructor Signature

I give TC3 permission to release my grade(s) for the above course(s) to my high school: ☐ Yes ☐ No

Audit Statement

My signature below certifies that I have chosen to audit one or more courses (as identified above). I understand that I will not receive college credit for any audited courses, nor will I be able to convert audit status to credit status at a later date.

_____
Student Signature

_____
High School Instructor Signature