



LifeLong Learning Enrollment/Registration Form College of the Siskiyous

Admissions & Records Office

Weed Campus: 800 College Avenue, Weed, CA 96094 (530) 938-5555
Yreka Campus: 2001 Campus Drive, Yreka, CA 96097 (530) 842-1245

Toll Free Number: 1-888-397-4339
You can also register online at www.siskiyous.edu

PLEASE PRINT Name
Last
First
Mi
Year
Spring
Summer
Fall

1. Social Security Number (Optional)

2. Legal Name

Last

First

Middle

3. Enrollment Status

1. First-time I've ever enrolled in college
 2. First-time COS, previously attended another college
 3. Returning to COS after an absence of one or more terms
 4. Continuing from last semester or summer session

Fast Forward... If you have registered for a COS class in the past 12 months and the information below has not changed, initial here to skip to item 13.

4. Date of Birth

Month Day Year

5. Gender

1. Male
 2. Female

6. Ethnicity

1. Asian
 2. Chinese
 3. Asian Indian
 4. Japanese
 5. Korean
 6. Laotian
 7. Cambodian
 8. Vietnamese
9. Other Asian
 10. African-American (Non-Hispanic)
 11. Filipino
 12. Hispanic
 13. Mexican, Mexican-American, Chicano
 14. Central American
 15. South American
 16. Other Hispanic
17. American Indian, Alaskan Native
 18. Other Non-White
 19. Pacific Islander
 20. Guamanian
 21. Hawaiian
 22. Samoan
 23. Other Pacific Islander
 24. White, Non-Hispanic
 25. Unknown
 26. Decline to State

7. Primary Language

1. English
 2. Language other than English

8. Citizenship

1. US Citizen
 2. Permanent Resident
 3. Temporary Resident
 4. Refugee/Asylee
 5. Student Visa
 6. Other

9. Educational Goal

1. Obtain a Bachelor Degree after Associate (AA) Degree
 2. Obtain a Bachelor Degree w/o earning AA Degree
 3. Obtain Associate Degree
 4. Obtain vocational Associate Degree
 5. Obtain Vocational Certificate
 6. Discover/formulate career interests, plans, goals
 7. Prepare for new career
 8. Advance in current job/career
 9. Maintain certificate or license
 10. Personal enrichment
 11. Improve basic skills (English, reading, math)
 12. Pursue high school diploma/GED
 13. Undecided

10. Time to Complete Educational Goal

1. One Semester
 2. One Year
 3. Three Semesters
 4. Two Years
 5. Three Years
 6. More than Three Years

11. News/Publication Information

May the College release to the news media, information/photos regarding your participation in COS activities?

1. Yes 2. No

12. Directory Information

May the College release information regarding your attendance and residence to outside inquiries? This information would include your name, address, phone number, class schedule, and participation in COS activities.

1. Yes 2. No

13. Length of time you have lived in California?

_____ specify year(s) & month(s)

14. Residency Information

What is your Driver's License #? _____ State _____

Do you have a vehicle? _____ Yes _____ No

If yes, in what state is your vehicle registered? _____

_____ Yes _____ No

Have you continuously lived in California for the past two years? If no, specify state/country and dates _____

_____ Yes _____ No

Do you intend California to be your permanent residence?

Have you done any of the following in the past two years?

_____ Yes _____ No Voted in another state or registered to vote in another state? If yes, what state? _____

_____ Yes _____ No

Attended out-of-state college/university as a resident?

_____ Yes _____ No

Did you file California State Income Taxes for the past calendar year?

15. Mailing Address

Street

City State

ZIP Country

Phone # Phone
Area Code

16. E-Mail Address

Fast Forward... If the following information has not changed, initial here to skip to item #22.

17. Educational Status

1. Non-High School Graduate
 2. Currently Attending High School or Below/Grade _____
 3. Attending Adult School
 4. High School Graduate
 5. Received GED or HS Certificate of Equivalency/Completion
 6. Received California High School Certificate of Proficiency
 7. Foreign School Diploma/Certificate
 8. Associate Degree
 9. Bachelor Degree or Higher

18. Year in which above education was completed

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