NONCREDIT APPLICATION FOR ADMISSION
REGISTRATION AND COURSE ENROLLMENT FORM

PLEASE COMPLETE THIS ENTIRE FORM IF YOU ARE A NEW STUDENT AND SUBMIT IN PERSON TO THE ADMISSIONS & ENROLLMENT OFFICE OF THE CAMPUS YOU PLAN TO ATTEND OR EMAIL NC_ADMIT@CCSF.EDU

Semester:
- ☐ Fall
- ☐ Spring
- ☐ Summer

Year ☐

Campus you would like to attend:
- ☐ Chinatown/North Beach (C)
- ☐ Downtown (D)
- ☐ Evans (E)
- ☐ John Adams (J)
- ☐ Mission (M)
- ☐ Ocean Campus (P)

1. IDENTIFICATION

Social Security/Student ID Number	Last Name (Family Name)	First Name	Middle Name
If you do not have a Social Security Number, leave blank and you will be assigned a Student Identification Number	(Previous Name) Last Name	First Name	Middle Name

Mailing Address/Number and Street	Apt.#	Gender ☐ Option Not listed ☐ Male ☐ Female	Birthdate : month / day / year / /
City State	Zip	Home / Work Phone ( )	Cell Phone Text ☐ Yes ☐ No ( )
Permanent Address/ Number and Street (if different)		E-Mail Address	

2. RACE/ETHNICITY

Are you Hispanic or Latino? ☐ **Yes** ☐ **No**

What is your Race/Ethnicity?
(Mark X one or more)

- ☐ 01 Hispanic, Latino
- ☐ 02 Mexican, Mexican American/Chicano
- ☐ 03 Central American
- ☐ 04 South American
- ☐ 05 Hispanic Other
- ☐ 06 Asian Indian
- ☐ 07 Asian Chinese
- ☐ 08 Asian Japanese
- ☐ 09 Asian Korean
- ☐ 10 Asian Laotian
- ☐ 11 Asian Cambodian
- ☐ 12 Asian Vietnamese
- ☐ 13 Filipino
- ☐ 14 Asian Other
- ☐ 15 Black or African American
- ☐ 16 American Indian/Alaskan Native
- ☐ 17 Pacific Islander Guamanian
- ☐ 18 Pacific Islander Hawaiian
- ☐ 19 Pacific Islander Samoan
- ☐ 20 Pacific Islander Other
- ☐ 21 White

3. Preferred Name

First Name (NEW) only:

_____

Disclaimer: Indicating a preferred name will only change which name appears in internal locations such as Web4 and class rosters. It will not change your legal name, which will appear on all Official/Unofficial Transcripts, Student Financial Aid records, Certificates/Diplomas, and 1098-T's. These items will not be changed unless proof of a legal name change is presented.

4. EDUCATION

What is your Long-Term Educational Goal?

(Mark X only one)

- ☐ Improve basic skills in English, ESL, citizenship, reading, or math (K)
- ☐ Earn vocational certificate without transfer(E)
- ☐ Maintain certificate or license (I)
- ☐ Discover/Formulate career interests, plans, or goals (F)
- ☐ Complete credits for high school or GED (L)
- ☐ Educational development-intellectual or cultural (J)
- ☐ Advance in current job/ career-update job skills (H)
- ☐ Undecided on goal (M)

What is the Highest Educational Level you have completed?

(Mark X only one)

- ☐ Not a graduate of, and not currently enrolled in High School (000)
- ☐ **Currently enrolled in High School** (100)
  Name of High School _____
- ☐ Currently pursuing certificate of High School Equivalency (200)

High School Graduate Without a College Degree:
（Fill in the year you received your Diploma or Certificate）

- ☐ Received a U.S. High School Diploma (3)
- ☐ Received a Certificate of High School Equivalency (GED) (4)
- ☐ Received California High School Proficiency Certificate (5)
- ☐ Received Foreign Secondary School Diploma or Certificate (6)

Year Received ☐

College Graduate
（Fill in the year you received your Degree ）

- ☐ Received Associate Degree (7)
- ☐ Received a Bachelor's Degree or Higher (8)

Year Received ☐

Is English your Primary Language? ☐ **Yes** ☐ **No**

5. EMERGENCY CONTACT

Emergency Contact Name				Phone Number ( )
Address-Number and Street	Apt. #	City	State	Zip

6. NON-DISCRIMINATION

All programs and activities offered by City College of San Francisco shall be performed in a manner which is free of discrimination on the basis of race, color, national origin, ancestry, religion, creed, sex, pregnancy, marital status, sexual orientation, disability, or veteran status.

7. INFORMATION RELEASE

Can "Directory Information" be released to the public, Federal, state and local governmental agencies without your written consent?

DIRECTORY INFORMATION is defined as information contained in an educational record of a student which would not generally be considered harmful or an invasion of privacy if disclosed. It includes, but is not limited to the student's name, address, telephone listing, date and place of birth, level of education, major field of study, participation in officially recognized activities and sports, weight and height of members of athletic teams, dates of attendance, degrees and awards received, and the most recent previous educational agency or institution attended.

(NOTE: The above listing of Directory Information may be revised as Federal and/or State regulations change. A listing of Directory Information is located in the College Catalog and Schedule of Classes. The College assumes no liability for honoring a student's request that such information be withheld.)

YES ☐

NO ☐

8. INSTITUTIONAL FUNDING INFORMATION

CCSF needs your help in gathering information to support vital funding! Without your participation in completing this survey the College stands to lose dollars critical for your education. This survey is voluntary and responses are treated with confidentiality.

1. Are you currently receiving benefits from: (Check all that apply)
   - ☐ TANF/CalWORKs?
   - ☐ Supplemental Security Income (SSI)?
   - ☐ General Assistance (GA)?
   - ☐ Any other economic public assistance?
3. Are you a single parent with custody of one or more minor children? ☐ YES ☐ NO
4. Are you a displaced homemaker attending City College of San Francisco to develop job skills? ☐ YES ☐ NO
   (A displaced homemaker is an adult who previously worked in the home to care for their family; did not work elsewhere, and relied on another family members income, but now must rely upon themselves financially.)
5. Do you receive or need assistance in English because English is not your first language? ☐ YES ☐ NO
6. In the last 36 months, have you moved to obtain temporary or seasonal employment in the areas of agriculture, dairy or fishing (or did you move to accompany parents or spouse who worked in those areas)? ☐ YES ☐ NO
7. In the past three months, have you been living in stable housing that you own, rent, or stay in as part of a household? ☐ YES ☐ NO

2. According to your family size, is your annual income less than the amount stated in the chart below:

   ☐ **YES** ☐ **NO**

Family Size, Including Yourself	Annual Income is Less Than:
Yourself Only	$65,250
2	$74,600
3	$83,900
4	$93,200
5	$100,700
Each Additional Family Member	Add $7,450

9. CHILD CARE

Do you need child care? **YES** ☐ **NO** ☐

Students seeking child care can call the Children's Council of San Francisco at (415) 343-3300 or email at: rr@childrenscouncil.org or call Wu Yee Children's Services at (415) 391-4956 or visit www.wuyee.org . Both of these organizations provide free child care information for parents and guardians.

Low income students with preschool-age children can also call the CCSF Child Care Line to access our 5 CCSF child care centers at (415) 561-1895. Low income students seeking child care for any age child can also contact the SF Centralized Eligibility List at (415) 276-2951.

10. STUDENT'S SIGNATURE

I declare that the foregoing statements of fact provided by me on this form are true and correct.

Signature	Date: month / day / year

11. ENROLLMENT

	CRN	Subject	Course	Days	Times	Course Title	Instructor's Name
1							
2							
3							