

Return registration for and payment by check to: Registrar's Office Clackamas Community College 19600 Molalla Avenue Oregon City, OR 97045

## **Backdoor Registration Form**

Part C: Signature  Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial liability. If you fail to pay on time and CCC refers your account(s) to a third party for collection, a collection fee of up to 25% of the debt or the maximum percentage allowed by applicable law will be added to your balance due. CCC will add these fees to your balance due, and they will be due and owing no earlier than 60 days after the date your payment is due and prior to referring your account to a collection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Detional Privacy Release  authorize CCC to release my academic and student account information to:  Person/Company Name  Person/Company Name	Part A: Student Ir	nformation	*Indicates required field				
Previous Name (first/given, last/family)  Date of Birth*  CCC does not require a Social Security Number (SSN) for admission and generally does not use the SSN for identification purposes. Although providing your SSN is voluntary, please note that you cannot receive financial aid or tax credits without providing a SSN (other forms of financial aid are available for studients without a SSN).  Phone  Type (cell, home, work)  Mailing Address* (street, city, state, zip)  Email Address*  You will be issued a CCC email address to use for all college business. However, we require that you provide a secondary email address that may be used as a Back-up.  Purpose of Study* (select one)  Credit classes for personal/professional interest (code: NA.OREDIT)  Workshops for career enhancement (Code: NA.OREDIT)  Workshops for career enhancement (Code: NA.OREDIT)  Code: NA.OREDIT)  Bettie Code: NA.OREDIT)  Transfer without a degree  Trake classes for fun  Transfer without a degree  Trake classes for fun  Transfer without a degree  Trake (e.g. Winter 2018) (e.g. 284278) (e.g. Conflict Resolution)  CRN  Course Title  (e.g. Conflict Resolution)  ENOUGHAND COURSE Title  Code: NA.OREDIT)  Part C: Signature  Payments as a time sine of regardation. By approxy that form, you appea bit of CCC politics and percedural including and the sine of regardation. By approxy that form you appead to a life content of the day your before due, and they will be due and owing no sainter than 60 days after the date your payment is all clauses. Please review the current class schedule for important deadlines.  Signature:  Date:  Date:  Ditional Privacy Release  authorize CCC to release my academic and student account information to:  Signature:  Signature:  Signature:  Signature:	Legal Name* (first/give	en, middle initial, las	st/family, suffix)				
Date of Birth*    Social Security Number	Chosen Name (first, la	ast)					
CCC does not require a Social Security Number (SSN) for admission and generally does not use the SSN for identification purposes. Although providing your SSN is voluntary, please note that you cannot receive financial aid or tax credits without providing a SSN (other forms of financial aid are available for students without a SSN).  Phone  Type (cell, home, work)  Mailing Address* (street, city, state, zip)  Email Address*  You will be issued a CCC email address to use for all college business. However, we require that you provide a secondary email address that may be used as a back-up.  Purpose of Study* (select one)  Credit classes for personal/professional interest (Code: NA CREDIT)  Workshops for career enhancement (Code: NA WORKSHOPS)  GED or pre-college classes (Code: NA ABEGED)  Part B: Course Registration Requests  Term  CRN  Course Title  (e.g. Winter 2018)  CRN  Course Title  (e.g. Conflict Resolution)  CRN  Course Title  (e.g. Conflict Resolution)  ENDORSHOPS  Part C: Signature  Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial laiding to the firming your account to a collection or generally responsible for all classes. Please of the CCC officient of the mansarine procedure including financial laiding to the firming your account to a collection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Deficional Privacy Release  until the following date:  Signature:  Deficional Privacy Release  until the following date:  Signature:	Previous Name (first/ç	given, last/family)					
providing your SSN is voluntary, please note that you cannot receive financial aid or tax credits without a SSN (other forms of financial aid are available for students without a SSN).  Phone  Type (cell, home, work)  Mailing Address* (street, city, state, zip)  Email Address*  You will be issued a CCC email address to use for all college business. However, we require that you provide a secondary email address that may be used as a back-up.  Purpose of Study* (select one)  Credit classes for personal/professional interest (Code: NA.CREDIT)  Workshops for career enhancement (Code: NA.CREDIT)  GED or pre-college classes (Code: NA.WRCSHCPS)  GED or pre-college classes (Code: NA.ABEGED)  Part B: Course Registration Requests  Term  CRN  Course Title  (e.g. 284278)  (e.g. Conflict Resolution)  Credits/CEUs  Cost  (e.g. 1.6CEU)  ENROLLMENT SERVICES US us to be lead on procedures including that is the air the lime of registation. Py signing bits form, you agree to all CCC policies and procedures including that and described for important deadless.  Format c: Signature  Date:  Detional Privacy Release  authorize CCC to release my academic and student account information to:  PersonCompany Name  PersonCompany Name  PersonCompany Name  PersonCompany Name	Date of Birth*		Social Security Number				
Phone   Type (cell, home, work)   Phone   Type (cell, home, work)	providing your SSN is volu	luntary, please note i					
Email Address*  You will be issued a CCC email address to use for all college business. However, we require that you provide a secondary email address that may be used as a back-up.  Purpose of Study* (select one)    Credit classes for personal/professional interest (Code: NA.CREDIT)   Workshops for career enhancement (Code: NA.CREDIT)   GED or pre-college classes   GED or pre-college classes (Code: NA.ABEGED)   Take classes for fun   Transfer without a degree   Take job-related or job-required classes   Code: NA.ABEGED)   Take classes for fun   Transfer without a degree   Take job-related or job-required classes   Code: NA.GREDIT)   Take job-related or job-required classes   Code: NA.GREDIT    Credits/CEUs   Cost   Ce.g. 1.6CEU   (e.g. 1.6CEU ) (e.g. 1.6CEU ) (e.g. \$150.0)   Credits/CEUs   Cost   Ce.g. \$150.0)   Credits/CEUs   Ce.g. \$150.0)   Credits/CEUs   Ce.g. \$150.0)   Credits/CEUs   Ce.g. \$150.0)   Credits/CEUs   Ce.g. \$150.0)		Without a So. 1/	Type (cell, home, work)	Phone		Туре	(cell, home, work)
You will be issued a CCC email address to use for all college business. However, we require that you provide a secondary email address that may be used as a back-up.  Purpose of Study* (select one)    Credit classes for personal/professional interest (Code: NA.CREDIT)   Workshops for career enhancement (Code: NA.CREDIT)   Workshops for career enhancement (Code: NA.CREDIT)   GED or pre-college classes (Code: NA.ABEGED)   GED or pre-college classes (Code: NA.ABEGED)   Take classes for fun   Transfer without a degree   Take job-required classes   Other    CRN	Mailing Address* (st	treet, city, state, zip	)				
Deused as a back-up.   Purpose of Study* (select one)	Email Address*						
Purpose of Study* (select one)    Credit classes for personal/professional interest (Code: NA.CREDIT)   Workshops for career enhancement (Code: NA.CREDIT)   Workshops for career enhancement (Code: NA.WORKSHOPS)   Prepare for GED exam   Prepare for GED		email address to us	se for all college business. F	However, we require that you pro	vide a secondary	/ email a	address that may
Code: NA CREDIT		(select one)	Educational Goals* (select all that apply)				
Term (e.g. Winter 2018)  CRN (e.g. 284278)  Course Title (e.g. Conflict Resolution)  Credits/CEUs (e.g. 1.6CEU)  Cost (e.g. 1.6CEU)  Cost (e.g. 1.6CEU)  Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial liability. If you fail to pay on time and CCC refers your account (s) to a third party for collection, a collection fee of up to 25% of the debt or the maximum percentage allowed by applicable law will be added to your balance due. CCC will add these fees to your balance due, and they will be due and opin or to referring your account to a collection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Detional Privacy Release authorize CCC to release my academic and student account information to:  Person/Company Name  Person/Company Name	(Code: NA.CREDIT)  ☐ Workshops for career enhancement (Code: NA.WORKSHOPS)  ☐ GED or pre-college classes			☐ Finish high school ☐ Prepare for GED exam ☐ Improve reading, writing, or math skills ☐ Learn English ☐ Take classes for fun ☐ Transfer without a degree ☐ Take job-related or job-required classes			
Term (e.g. Winter 2018)  Part C: Signature  Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial liability. If you fall to pay on time and CCC refers your account (s) to a third party for collection, a collection fee of up to 25% of the debt or the maximum percentage allowed by applicable law will be added to your balance due, and they will be due and only one artier than 60 days after the date your payment is due and prior to referring your account to acollection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Detional Privacy Release  authorize CCC to release my academic and student account information to:  Person/Company Name  Person/Company Name	Part B: Course R	egistration F	Requests				
Part C: Signature  Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial liability. If you fail to pay on time and CCC refers your account(s) to a third party for collection, a collection fee of up to 25% of the debt or the maximum percentage allowed by applicable law will be added to your balance due. CCC will add these fees to your balance due, and they will be due and owing no earlier than 60 days after the date your payment is due and prior to referring your account to a collection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Detional Privacy Release  authorize CCC to release my academic and student account information to:  Person/Company Name  Person/Company Name							
Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial liability. If you fail to pay on time and CCC refers your account(s) to a third party for collection, a collection fee of up to 25% of the debt or the maximum percentage allowed by applicable law will be added to your balance due. CCC will add these fees to your balance due, and they will be due and owing no earlier than 60 days after the date your payment is due and prior to referring your account to a collection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Deptional Privacy Release  authorize CCC to release my academic and student account information to:  Person/Company Name  Signature:  Signature:  Signature:  Signature:	(e.g. Winter 2018)	(e.g. 284278)	(e.g. Conflict Resolut	tion)	(e.g. 1.6CE	:U)	(e.g. \$150.00)
Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial liability. If you fail to pay on time and CCC refers your account(s) to a third party for collection, a collection fee of up to 25% of the debt or the maximum percentage allowed by applicable law will be added to your balance due. CCC will add these fees to your balance due, and they will be due and owing no earlier than 60 days after the date your payment is due and prior to referring your account to a collection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Deptional Privacy Release  authorize CCC to release my academic and student account information to:  Person/Company Name  Signature:  Signature:  Signature:  Signature:							
Payment is due at the time of registration. By signing this form, you agree to all CCC policies and procedures including financial liability. If you fail to pay on time and CCC refers your account(s) to a third party for collection, a collection fee of up to 25% of the debt or the maximum percentage allowed by applicable law will be added to your balance due. CCC will add these fees to your balance due, and they will be due and owing no earlier than 60 days after the date your payment is due and prior to referring your account to a collection agency. You will be held academically and financially responsible for all classes. Please review the current class schedule for important deadlines.  Signature:  Date:  Deptional Privacy Release  authorize CCC to release my academic and student account information to:  Person/Company Name  Signature:  Signature:  Signature:  Signature:							
authorize CCC to release my academic and student account information to:  Person/Company Name  Intil the following date:  Signature:	Payment is due at the time of refinancial liability. If you fail to pa up to 25% of the debt or the ma add these fees to your balance due and prior to referring your a all classes. Please review the cost Signature:	egistration. By signing this ay on time and CCC refer eximum percentage allow due, and they will be due account to a collection ag	rs your account(s) to a third party to wed by applicable law will be added e and owing no earlier than 60 day gency. You will be held academica	for collection, a collection fee of ed to your balance due. CCC will ys after the date your payment is	ENROLLM	ENT S	ERVICES USE
until the following date: Signature:	Optional Privacy Release						
Intil the following date:, Signature:, Signature:	authorize CCC to release	my academic and	I student account informa	ation to:	Person/Company Name		
Please complete this portion if you wish to allow your employer to access you CCC records.	_	MM/DD/	/YYYY				