

**Indicates required field*

Term* _____ First Name* _____ Last Name* _____

Student ID* _____ Birthdate (MM/DD/YYYY)* _____

ADD CLASSES

Course Number (e.g. PSY 201)	Course Section Number (e.g. 01)	Grading Option (A-F, P/NP, or Audit)	Credits	Instructor/Advisor Signature (required after course has begun, to waive requisites, or as otherwise noted)

DROP CLASSES

Course Number (e.g. PSY 201)	Course Section Number (e.g. 01)

CHANGE GRADING OPTION

Course Number (e.g. PSY 201)	Course Section Number (e.g. 01)	Grading Option (A-F, P/NP, or Audit)

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.

Student Signature* _____ Date _____

OFFICE USE ONLY

EMAIL: registration@clackamas.edu
 FAX: 503-722-5864
 IN PERSON: Enrollment Services at any of the three campuses
 MAIL: Registration & Records, Clackamas Community College,
 19600 Molalla Ave, Oregon City, OR 97045-7998