



# CONTINUING EDUCATION REGISTRATION FORM

South Campus 2201 South 7th St  
Tacoma, WA 98405  
253.690.7400

North Campus 1101 South Yakima Ave  
Tacoma, WA 98405  
253.690.7000

www.bates.edu

Fill in:  Male  Female

All Parent information

This is the parent earning

Bates college credits

Leave Blank:

LAST NAME FIRST MI SSN Per District Statement ID Number Other System		STATE ZIP EMAIL		US CITIZEN? <input type="checkbox"/> Yes <input type="checkbox"/> No F NOT, WHAT TYPE OF VISA DO YOU HAVE? (Please Check one) <input type="checkbox"/> IM ... Resident Alien/Immigrant <input type="checkbox"/> F1 ... Student <input type="checkbox"/> I-20 ... Other or Unknown	
ADDRESS-ALBURN AND STREET, ROUTE, OR PO BOX CITY		PHONE ( ) DAY PHONE ( ) EVENING PHONE ( )		Quarter of Registration (Please Check one) <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Spring	
IN CASE OF EMERGENCY NOTIFY: NAME TITLE No. Program/Phone Course No. Section Building Days Time Class Hours Starting Date Instructor		Fee <input type="checkbox"/> Full <input type="checkbox"/> Spring		TOTAL FEE \$	
WORK/EDUCATION/RACE/FAMILY WHICH WOULD YOU CONSIDER YOURSELF TO BE? (optional) (Please Check one) <input type="checkbox"/> 600 American Indian or Alaska Native <input type="checkbox"/> 605 Chinese <input type="checkbox"/> 606 White <input type="checkbox"/> 607 Black or African American <input type="checkbox"/> 608 Filipino <input type="checkbox"/> 609 Other Asian <input type="checkbox"/> 610 Native Hawaiian or Other Pacific Islander <input type="checkbox"/> 611 Japanese <input type="checkbox"/> 612 Korean <input type="checkbox"/> 613 Vietnamese <input type="checkbox"/> 614 Other Race <input type="checkbox"/> 615 Hispanic or Latino <input type="checkbox"/> 616 Other		PURPOSE FOR ATTENDING BATES TECHNICAL COLLEGE (Please Check one) <input type="checkbox"/> 14 High School Diploma or GED <input type="checkbox"/> 15 Personal enrichment <input type="checkbox"/> 16 Further career education <input type="checkbox"/> 17 Other		ARE YOU OF HISPANIC/LATINO ORIGIN? (optional) (Please Check one) <input type="checkbox"/> 618 No, not Spanish/Hispanic <input type="checkbox"/> 619 Yes, Puerto Rican <input type="checkbox"/> 620 Yes, Mexican, Mexican American, Chicano <input type="checkbox"/> 621 Yes, Cuban <input type="checkbox"/> 622 Yes, Other Spanish/Hispanic (Argentinian, Colombian, Dominican, Nicaraguan, Salvadorian, etc.)	
WORK STATUS WHILE ATTENDING BATES (Please Check one) <input type="checkbox"/> 11 Full-time immediate <input type="checkbox"/> 12 Full-time employment (including self-employed or interim) <input type="checkbox"/> 13 Part-time off-campus <input type="checkbox"/> 14 Part-time on-campus <input type="checkbox"/> 15 Not employed, but seeking employment <input type="checkbox"/> 16 Not employed, not seeking employment <input type="checkbox"/> 17 Other		EDUCATION LEVEL PRIOR TO ATTENDING BATES (Please Check one) <input type="checkbox"/> 11 Less than High School Graduation <input type="checkbox"/> 12 GED <input type="checkbox"/> 13 High School graduate <input type="checkbox"/> 14 Some post High School, but no degree or certificate earned <input type="checkbox"/> 15 Certificate <input type="checkbox"/> 16 Associate Degree <input type="checkbox"/> 17 Bachelor Degree or above <input type="checkbox"/> 18 Other		HOW LONG DO YOU PLAN TO ATTEND BATES? (Please Check one) <input type="checkbox"/> 11 One quarter <input type="checkbox"/> 12 Two quarters <input type="checkbox"/> 13 One year <input type="checkbox"/> 14 Up to two years, no degree or certificate planned <input type="checkbox"/> 15 Long enough to complete a degree or certificate <input type="checkbox"/> 16 Don't know <input type="checkbox"/> 17 Other	
Do you have any physical or mental impairment that substantially limits one or more major life activities, such as seeing, hearing, speaking, walking, learning, etc.? (optional) <input type="checkbox"/> Yes <input type="checkbox"/> No Conditional information used for statistical reporting only. Persons with disability may be eligible for support services and should contact the Special Needs Coordinator/Disability Office, at 253.690.7013, for information on services.		WHAT IS YOUR CURRENT FAMILY STATUS? (Please Check one) <input type="checkbox"/> 11 Single parent with children or other dependents in your care <input type="checkbox"/> 12 Coupled with children or other dependents in your care <input type="checkbox"/> 13 Without children or other dependents in your care <input type="checkbox"/> 14 Other		HEALTHY SERVICE (Please Check one) <input type="checkbox"/> 1 ... Veterans <input type="checkbox"/> 3 ... Vietnam Veterans <input type="checkbox"/> 2 ... In Service None	

Disclosure Statement: Your social security number is confidential and, under a federal law called the Family Educational Rights & Privacy Act, the college will protect it from unauthorized use and/or disclosure. In compliance with state/federal requirements, disclosure may be authorized for the purposes of state and federal financial aid, hospital/insurance learning for credit, Employment Security, Job Placement Services, Academic transcripts, or accountability research.

Parent signature \_\_\_\_\_ DATE: \_\_\_\_\_

STUDENT SIGNATURE: \_\_\_\_\_

Additional Information for Cooperative Preschools  
 Preschool Name \_\_\_\_\_  
 Child's Name \_\_\_\_\_  
 Child's Class \_\_\_\_\_

Preschool child's information

## How to fill out the Bates Registration Form:

### One parent should fill out the Bates Registration form

It should be the parent that will be earning the Bates college credits. If a parent can use the college credits to renew a teaching certificate or can use the college credits to fulfill their college elective requirements, then they should be the one filling out the Bates Registration form.

### Fill in **PERSONAL** section

- ✓ Make sure the parent fills in their name (not their child's name)
- ✓ Fills in their birth date (the birth date becomes their PIN # to access their transcript)
- ✓ Fills in SS# : Parent/guardians SS# will be needed to assign a Student ID# for all future registration purposes

A Student ID# will be assigned that will coordinate with their SS# and PIN # which allows to access Bates transcript online.

### Leave Classes Section and Payment sections blank.

### Fill in WORK/ EDUCATION/ RACE/ FAMILY SECTION

This information is used by the college when applying for grants to support diverse programs.

Important: fill out the bottom box: Additional Information for Cooperative Preschools.