

Northwest Florida State College

Non-Credit – Application / Residency / Registration Form

STUDENT INFORMATION: (Please Print in Ink)

1. SOCIAL SECURITY NUMBER: _____

2. _____
 LAST NAME FIRST NAME MIDDLE NAME MAIDEN

3. _____
 MAILING ADDRESS CITY STATE ZIP

4. _____ 5. SEX: MALE FEMALE
 HOME PHONE NUMBER WORK PHONE NUMBER

6. RACE (Check all that apply): ASIAN BLACK HISPANIC AMERICAN INDIAN UNKNOWN WHITE

7. PRIMARY LANGUAGE: ENGLISH GERMAN SPANISH FRENCH OTHER (Specify) _____

8. CITIZENSHIP: U.S. CITIZEN RESIDENT ALIEN Resident Alien # _____ Country of Citizenship _____

9. DATE OF BIRTH: ____ - ____ - ____ 10. High School/GED Graduation Date: _____ or Mark here if you have not graduated from HS
 Month Day Year

11. PROGRAM - Why are you attending NWFSC:
 8100 ADULT BASIC EDUCATION 8200 GED 8400 PERSONAL ENRICHMENT 8600 KIDS ON CAMPUS
 8150 ABE - ESOL 8300 APPRENTICESHIP 8500 UPGRADE JOB SKILLS 8800 PRIME TIME

RESIDENCY STATEMENT:

I CERTIFY I AM A RESIDENT OF FLORIDA BASED ON THE FOLLOWING (check one)

1. ____ I have lived in Florida for the preceding twelve (12) months or longer beginning on _____
 Month Day Year

2. ____ I am active duty military stationed in Florida or a Florida resident interrupted by military duty.

3. ____ I am the spouse of a service person on active duty stationed in Florida.

4. ____ I am the dependent of a service person on active duty stationed in Florida.

5. ____ I am the dependent of a Florida resident, having lived with said relative for five (5) years.

6. ____ I am a full-time instructional/administrative person employed in Florida by a public school, state community college or state institution of higher education or I am the spouse or dependent of said person.

7. ____ I am a non-resident of Florida, but a resident of the following state (per the Florida statutes): _____ State of Residency

REGISTRATION:

COURSE	REFERENCE NUMBER	CLASS	LOCATION	DAY	TIME

STUDENT CERTIFICATION:

I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application or residence affidavit may result in disciplinary action, denial or admission, and invalidation of credits or degrees earned. If admitted, I hereby agree to abide by the policies of the Board of Trustees and rules and regulations of the college. I hereby authorize OWC to obtain student records electronically from any Florida school or college previously attended. I further agree to allow all my records to be electronically transferred to the institution of my choice. I certify that as a condition of my admission, I will not engage in the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance during enrollment at NWFSC.

_____ Date
 Applicant Signature