



NON-DEGREE REGISTRATION FORM

THIS FORM IS FOR NON-DEGREE SEEKING STUDENTS ONLY.

Please direct questions to the Records Office in Berks Hall Room 107, or call 610.607.6243. Once complete, submit to the Records Office, fax to 610.607.6290 or email form to records@racc.edu

Name: _____ RACC ID or SSN#: _____

Email: _____ Phone #: _____ Date of Birth: ___ / ___ / ___

Home Address: _____

I am requesting permission to take courses at RACC for transfer credit in:

- Summer 20____
- Fall 20 ____
- Winter Interim 20 ____
- Spring 20 ____

Please provide the following information for the course(s) you are registering for:

| <u>COURSE #</u> | <u># OF CREDITS</u> | <u>DAYS</u> | <u>TIME</u> | <u>THIS COURSE HAS A PREREQUISITE</u> | |
|-----------------------|---------------------|-------------|-------------|---------------------------------------|----|
| _____ - _____ - _____ | _____ | _____ | _____ | Yes | No |
| _____ - _____ - _____ | _____ | _____ | _____ | Yes | No |
| _____ - _____ - _____ | _____ | _____ | _____ | Yes | No |
| _____ - _____ - _____ | _____ | _____ | _____ | Yes | No |
| _____ - _____ - _____ | _____ | _____ | _____ | Yes | No |
| Total Credits: _____ | | | | | |

I am enrolling at RACC for (check all that apply)

- Job Skills Training (Employer Name: _____)
- Personal Interest
- Prerequisites/other coursework for a degree from another college (College Name: _____)
- Professional Development

I understand that:

- I am electing to take the course(s) listed above without taking the required placement test or completing any required prerequisites at RACC.
- The instructor(s) of the course(s) above will not be expected to cover information or skills taught or confirmed through RACC's placement test process or any required prerequisites. I assume responsibility for learning any prerequisite material myself.
- The course(s) above and the grade(s) I earn will become a part of my permanent academic record and I understand that whatever grade(s) I earn in this course(s) may impact my future financial aid eligibility. I am responsible for requesting that an official transcript be sent to my current college or university at the completion of this semester.
- Transient students are not assigned an academic advisor.
- In accordance with the policies of the Board of Trustees, I may be administratively withdrawn from the college and/or forego such benefits as transcripts and diplomas if tuition charges, fees and any other financial obligations are not fulfilled in an agreed upon manner. I acknowledge my financial responsibility even though I may receive financial aid or other educational assistance to discharge this obligation. I agree to pay all costs and charges necessary for the collection of any amount not paid when due. I also agree to pay all attorney's fees and/or legal fees and court costs.

Student Signature: _____ **Date:** _____