

Admissions & Records

College of the Siskiyous, 800 College Ave., Weed, CA 96094
Phone: (530) 938-5500 - Fax: (530) 938-5367 – Email: registration@siskiyous.edu

COS - Registration Form

DIRECTIONS: Please complete this entire form (incomplete forms cannot be processed)

Check the box to the right of the number if there is no change from last term attended. If more than a year has elapsed since last registration you must complete the entire form.

1. Registration Information

Term Registering For: _____ Last Term Attended: _____

2. Personal Information

Last: _____ First: _____ Middle: _____

Preferred Name: _____ Previous Name: _____

Date of Birth: _____ COS Student ID Number: _____

3. Gender / Gender Designation

- Male Female Not-Transgender Non-Binary Gender / Not Transgender
- Transgender Non-Binary Gender & Transgender Decline to State
- Non-Binary Gender & Declined Transgender Non-Binary Gender

4. Sexual Orientation

- Straight / Heterosexual Gay or Lesbian / Homosexual Bisexual
- Other Decline to State

5. Current Physical Address

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

6. Citizenship

- U.S. Citizen Permanent Resident Temporary Resident Refugee / Asylee
- Student Visa Amnesty Other Status

If you did not specify US Citizen, please indicate the following:

Alien Registration Number or Visa Type: _____

Issue Date _____ Expiration Date _____

7. Ethnicity

- Asian Chinese Asian Indian Japanese
- Korean Laotian Cambodian Vietnamese
- Other Asian Black Non-Hispanic Filipino Hispanic
- Mexican, Mexican/American, Chicano Central American South American
- Other Hispanic American Indian/Alaskan Native Pacific Islander
- Samoan Guamanian Hawaiian Other Pacific Islander
- White Non-Hispanic Unknown Decline to State

Year: _____
First: _____
Name Last: _____

PLEASE PRINT

8. **Directory Information (AP 5040)**

May the College release information regarding your attendance and residence to outside inquiries?
 Yes No

9. **Educational Level**

- Non-High School Graduate
- Received California High School Certificate of Proficiency
- Currently Attending High School or Below; Grade _____
- Foreign School Diploma / Certificate
- Attending Adult School Associate Degree
- High School Graduate Bachelor Degree or Higher
- Received GED or High School Certificate of Equivalency / Completion

Date Education Level was obtained: _____

10. **Student Type**

- First Time - Never Attended College
- First Time at COS Previously Attended Another College
- Continuing From Last Semester
- Returning to COS After an Absence of One or More Years

11. **Name of Last High School Attended & Graduation Date**

High School: _____ Graduation Date: _____ State: _____

The following information must be answered each term for reporting purposes

12. **Educational Objective for Term**

- Associate & Transfer
- Move Non-credit to Credit Coursework
- Advance in Career / Update Skills
- Associate Degree
- Undecided on Goal
- Educational Development
- Discover Career Interest / Goal
- Improve Basic Skills
- Transfer Without Associate
- Meeting 4-year College Requirements
- Maintain Certification / License
- Certificate of Achievement
- Uncollected / Unreported
- Credits for High School Diploma / GED

13. **Residency Questions**

Have you continuously lived in California for the past two years? Yes No

If no, specify state / country: _____ Dates: _____

If no, length of time in California: _____

What is your Driver's License #? _____ State: _____

Do you have a vehicle? Yes No

If yes, in what state is your vehicle registered? _____

Do you intend California to be your permanent residence? Yes No

Have you done any of the following in the past two years?

Voted in another state or registered to vote in another state? Yes No

If yes, what state? _____

Attended out-of-state college / university as a resident? Yes No

Did you file California State Income Taxes for the past calendar year? Yes No

Students under 19 years old and unmarried ONLY

Are your parents / guardians California residents and have they continuously lived in California for the past two years? Yes No

If no, when did your parents / guardians enter California (MMDDYYYY): _____

14. Are you on any of the following economic assistance programs?

- TANF / AFDC / CalWORKs SSI
- General Assistance None

15. Are you a single parent with custody of a minor child? Yes No

16. Are you a displaced homemaker? Yes No

17. Have you ever been convicted of a crime? Yes No Decline to state

18. Have you been unemployed for 27 weeks or longer? Yes No

19. Do you believe that your cultural beliefs or practices have made it difficult to find employment? Yes No

20. Are you a seasonal farm worker? Yes No

21. Are you or parent / guardian an honorably discharged Veteran? Yes No

Student Military Status

- Currently Serving on Active Duty
- Veteran
- Member of the Active Reserve
- Member of the National Guard

Parent / Guardian Military Status

- Currently Serving on Active Duty
- Veteran
- Member of the Active Reserve
- Member of the National Guard

22. Are you now or have you ever been in a court-ordered out of home placement such as a foster home, group home or court placement with a relative (AKA Foster youth)? (If Yes answer Status below) Yes No

- Current In-state Previous In-state Previous Temporary Status
- Current Out-of-state System Previous Out-of-state

23. Are you considered homeless (lack a fixed, regular, and adequate nighttime residence)? Yes No

24. Parent / Guardian Educational Level

Parent / Guardian 1

- Grade 9 or Less
- Some High School
- High School Graduate
- Some College
- Associate's Degree (AA/AS)
- Bachelor's Degree (BA/BS)
- Graduate or Professional Degree
- Not Applicable

Parent / Guardian 2

- Grade 9 or Less
- Some High School
- High School Graduate
- Some College
- Associate's Degree (AA/AS)
- Bachelor's Degree (BA/BS)
- Graduate or Professional Degree
- Not Applicable

25. How many legal dependents do you have under 18 years of age? _____

26. How many legal dependents do you have 18 years of age or older? _____

27. Were you incarcerated at any time at or after the age of 18?

- Never Incarcerated
- City or County Correctional Facility
- California Department of Corrections & Rehabilitation Correctional Facility
- Out of State Correctional Facility
- U.S. Federal Bureau of Prisons Correctional Facility
- Private Correctional Facility

28. Were you incarcerated at any time before the age of 18?

- Never Incarcerated
- County Run Juvenile Hall
- County Run Secure Youth Treatment Facility
- County Run Juvenile Detention Camp
- Private Correctional Facility

Term: _____

Please list the courses you wish to attend, with CRN (Course Registration Number) and Course

CRN	Course Number	Course Title

Term: _____

Please list the courses you wish to attend, with CRN (Course Registration Number) and Course

CRN	Course Number	Course Title

I verify that I am responsible for the course(s) listed above and that I have read any advisories in the COS Catalog. I am aware that the above course(s) are college-level and may be more coursework than I have previously undertaken. I also understand that any course taken will go on my official transcript, which is a legal permanent document that I may be asked to present when applying to future institutions or places of employment. The information on this form is true and correct to the best of my knowledge. Falsification of any information may result in my dismissal from classes. I acknowledge I am responsible for payment of all fees related to the course(s) above.

Student Signature: _____

Date: _____

Office Use Only

Signature: _____

Date: _____

K-12 Students - Special Admission Request

Any student who is attending a traditional K-12 school, high school completion program, or Adult School and is under the age of 23 must complete the information below.

Student's age and grade level on first day of COS course.

Age: _____ Grade Level: _____

Current School: _____

City: _____ State: _____

FERPA Release

- I hereby authorize COS to share academic (grades, status, GPA, unofficial transcripts) and billing information to the above school.
- I hereby authorize COS to share academic (grades, status GPA) and billing information to: _____

The code word we will use for the release of information is: _____

Student Signature: _____ Date: _____

I understand that some course topics may not be appropriate for minors. I am aware that college-level courses may be more coursework than the student has previously undertaken and that these courses and grades will be recorded on the student's permanent college transcript. I also understand that I need a FERPA release to access any information on my student's account, even confirmation that the registration has been processed; a FERPA release is required even if the student is a minor. I swear under penalty of perjury that the information listed on this form is true and correct to the best of my knowledge.

Parent/Guardian Signature: _____ Date: _____

I certify that this student will benefit from college level work and I recommend them for enrollment in the course(s) listed. I agree that this student is aware of the weight and responsibility that comes with college level coursework. (Education Code 76001-02) For Summer Session: I certify that I have not recommended for enrollment in non-exempt courses at College of the Siskiyous more than five percent of the total number of pupils who completed the above named student's grade level (Education Code 48800).

School Official Signature: _____ Date: _____

School Official Name (please print): _____

Phone: _____ Email: _____

Please see [list of courses](#) students 15 and under are not allowed to take without instructor approval.