

Butler Community College Community Education

Enriching Minds for a Lifetime

All information below is required. (The Social Security number is optional)

First Name _____ MI _____

Last Name _____

Other name's that records may be found under _____

Permanent Address _____

Street

City

State

Zip Code

Telephone Numbers _____ (home)

_____ (cell)

Email Address _____

Date of birth ____/____/____ (Optional)-Social Security ____-____-____

Male ____ Female ____ Are you a U.S. citizen or permanent resident? Yes or No

Are you Hispanic or Latino? (yes/no)

What is your race? Select one or more of the following: 1) American Indian or Alaska Native; 2) Asian; 3) Black or African American; 4) Native Hawaiian or Other Pacific Islander; 5) White.

Have you ever taken a class at Butler Community College, either for credit or non-credit?
YES or NO

I agree to share academic and directory information to outside agencies or institutions such as the Armed Forces, employment agencies, colleges and universities, etc. This information will be used for research and verification purposes only.
YES or NO

Course #	Course Title	Fee
		Total

For Office Use Only:

Pd date _____ By Cc_Cash_ CK _____ Data Entry _____ Sent Letter _____