



Shasta College

Registration Form

- Summer
- Fall
- Spring

Staff Use Only
<input type="checkbox"/> RGPE
Processed by _____ Date _____

Full Name: _____ Student ID: _____

DOB: _____ Phone: _____ E-mail: _____

Address: _____
Street City State Zip Code

- Payment or payment plan required by midnight the day you register to avoid being dropped for non-payment
- Adhering to all add/drop deadlines is the student's responsibility

REQUIRED FOR WAITLISTED COURSES.
 Registering after census date requires a "late add petition." For important dates see:
www.shastacollege.edu/admissions

Choose One	Course Title (Ex: ACCT-101)	Course Section Number (Ex: U2878)	Days of the Week	Units	Instructor Signature	Date Approved	Date of First Attendance

Student Signature _____ Total Units _____ Over 18 units? _____
 Counselor Signature _____

Please submit registration form to admissions@shastacollege.edu

Proxy: to request processing of transactions (Optional)

In compliance with the Department of Education's "Family Educational Rights and Privacy Act" (FERPA), the student must sign a release to authorize another party to process transactions on the student's behalf. **The student (not the proxy) has the ultimate responsibility for complying with applicable requirements, policies, and deadlines, and for the timely payment of tuition and fees.**

I hereby authorize the person named below to serve as an authorized party for the purpose of my registration at Shasta College for this transaction only. My proxy may have access to any and all of my records that they request for the purpose of processing this transaction. I understand that I am responsible for any decisions made by my proxy on my behalf for this transaction only.

This proxy is for one transaction only; subsequent transactions will require a new proxy form. To authorize Shasta College to release information to an authorized party indefinitely, please complete the Release of Information Form found on www.shastacollege.edu/admissions_forms.

Name of authorized person	Relationship
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Student Signature	Date
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