



Register Now

Temple College is an Equal Opportunity Institution. Temple College does not discriminate on the basis of gender, disability, race, color, age, religion, national origin, or veteran status.



PERSONAL INFORMATION

LAST NAME	FIRST NAME	MI	E-MAIL ADDRESS
STREET ADDRESS		CITY	STATE ZIP
HOME PHONE	ALTERNATE PHONE	SOCIAL SECURITY # * <small>* Temple College ID# or Social Security# is needed for transcripts or certificates to be issued.</small>	DATE OF BIRTH
GENDER** (pick one)	ETHNIC GROUP** (pick one)	(pick one)	<input type="radio"/> ASIAN/ORIENTAL/PACIFIC ISLANDER <input type="radio"/> AMERICAN INDIAN/ALASKAN NATIVE <input type="radio"/> INTERNATIONAL
<input type="radio"/> MALE <input type="radio"/> FEMALE	<input type="radio"/> HISPANIC/LATINO <input type="radio"/> NON HISPANIC/LATINO	<input type="radio"/> WHITE <input type="radio"/> BLACK/AFRICAN AMERICAN	

**This information will be used in a non-discriminatory manner consistent with applicable civil rights laws.

COURSE INFORMATION

COURSE TITLE	COURSE CODE	COURSE DATE	REGISTRATION FEE

SURVEY

Please complete the following optional and voluntary survey. Please check ALL that apply:

<input type="radio"/> I HAVE AT LEAST A HIGH SCHOOL DEGREE	<input type="radio"/> I RESIDE WITHIN THE STATE OF TEXAS
<input type="radio"/> I AM ENROLLED IN A CREDIT CLASS AT TC	<input type="radio"/> I AM DISABLED <small>(legally blind, deaf, wheelchair bound, learning disabled, etc.)</small>

PHOTO RELEASE

Only in the event class-related pictures are taken.

I acknowledge and consent to the use of my photograph by Temple College in any and all publications, advertising, or website and waive any rights to compensation in any form. Temple College is not required to obtain my permission to reuse or republish this photograph in the future. I understand that the photo(s) if used will be for promotional purposes for Temple College, and I waive any claim to financial remuneration for the use of these photo(s).

STUDENT SIGNATURE: _____ DATE: _____

