# 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_____