



Feather River College

ADMISSIONS & RECORDS OFFICE

570 Golden Eagle Avenue

Quincy, CA 95971

(530) 283-0202

Fax: (530)-283-9961

High School Co-Enrollment Student Permit/Registration Form

Date _____

FRC ID # or SS #: _____

Grid for Last Name: 12 empty boxes

Last Name

First

Initial

Mailing Address _____

PO Box/Street Address

City

State

Zip

Phone (____) _____ - _____ Email Address _____

Grade Level _____ Name of School _____

Semester for which you are registering: Fall Spring Summer 20 23

Have you previously applied to FRC - YES NO - If yes skip to back, if no continue below.

RESIDENCY:

If you are 19 or OLDER, answer questions 1-4 as they pertain to yourself.

If you are UNDER 19, and not married, answer these questions as they pertain to your parents.

Two columns of questions regarding residency for 'YOU' and 'PARENTS' with YES/NO checkboxes.

U.S. Citizen Yes

Only if you are NOT a U.S. Citizen:

Alien Registration # _____

Date Issued: _____

- 2....Permanent Resident
3....Temporary Resident (Amnesty)
4....Refugee/Asylum
5....Student Visa (F-1, M-1, VISA)
6....Other Status _____

If not a U.S. Citizen, COUNTRY of permanent address: _____

If not a California resident, STATE of permanent address: _____

If not a Plumas County resident, COUNTY of permanent address: _____

Is English your primary language?

YES NO

GENDER:

Gender selection box

M=Male
F=Female

Birth Date:

____ / ____ / ____
Month Day Year

Student Ethnicity:

Student Ethnicity selection box

- A..... Asian
AC..... Chinese
AI..... Asian Indian
AJ..... Japanese
AK..... Korean
AL..... Laotian
AM..... Cambodian
AV..... Vietnamese
AX..... Other Asian
B..... African-American
F..... Filipino
H..... Hispanic
HM..... Mexican, Mexican American, Chicano
HR..... Central American
HS..... South/American
HX..... Other Hispanic
N..... American Indian
N..... Alaskan Native
O..... Other Non-White
P..... Pacific Islander
PG..... Guamanian
PH..... Hawaiian
PS..... Samoan
PX..... Other Pacific Islander
W..... White/Non-Hispanic
XD..... Decline to state

PLEASE COMPLETE REVERSE SIDE




	Course #	CRN#	Course Title	Day	Time	Units
1	ENV2299	7695	Special Topics in Env. Studies	M-S	variable	1
2			Santa Cruz Forestry Challenge			
3						

<u>APPROVAL OF FRC ADVISOR</u>	
Signature: N/A	Date:

<u>APPROVAL OF PARENT / GUARDIAN</u>	
Signature:	Date:

<u>APPROVAL OF SCHOOL PRINCIPAL</u>	
Signature:	Date:
<p><i>By signing this form, I certify that the student's attendance at Feather River College is in compliance with Section 48800 of the Education Code and that the student demonstrates the ability to benefit from instruction at Feather River College. In addition, K-12 attendance is monitored to not recommend more than 5% of total number of students of any single grade level for summer enrollment.</i></p>	

<u>Instructor's Signature:</u> (Required for students below 11 th grade only)	
1 Signature: 	Date: 8/7/23
2 Signature:	Date:
3 Signature:	Date:

I certify that the information on this application is correct, and I understand that falsification may result in my dismissal from Feather River College. I understand that the information on this form and my final grades/transcripts will be made available to my school official.

<u>STUDENT</u>	
Signature:	Date:
<p>Due to higher education rules concerning confidentiality of college students, registration for courses is to be conducted personally by the <u>High School</u> student not by a proxy. Please proceed to the Admissions and Records Office to officially register and pay your fees.</p>	

<u>APPROVAL OF REGISTRAR</u>	
Signature:	Date:
OFFICE USE: <input type="checkbox"/> SOAHOLD Admissions _____	Date: