

NON-DEGREE STUDENT REGISTRATION FORM

Term: _____

Name (last, first, middle initial)	Student ID or SSN
Mailing address number and street	town, state, ZIP code
Phone	type (home, cell, work) e-mail address
Are you currently enrolled at another VSC school or planning to enroll this term? <input type="checkbox"/> yes <input type="checkbox"/> no Where? <input type="checkbox"/> CCV <input type="checkbox"/> CSC <input type="checkbox"/> JSC <input type="checkbox"/> LSC	

DEMOGRAPHIC INFORMATION

Complete this section, only if new to the VSC or if there are changes

Social security number: _____ - _____ - _____ Date of Birth: _____

Student status: <input type="checkbox"/> First college course <input type="checkbox"/> Returning student <input type="checkbox"/> High school/dual enrollment <input type="checkbox"/> Other _____ <input type="checkbox"/> Transfer student	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Single	Citizenship <input type="checkbox"/> US <input type="checkbox"/> Non-resident alien <input type="checkbox"/> Resident alien: _____ (citizenship country)	Residency: <input type="checkbox"/> Vermont <input type="checkbox"/> Non-resident: _____ (state)
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High school graduate: Y N GED Year: _____ High school: _____ (name) (state)

Ethnicity: Are you Hispanic or Latino: Y N Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown	Does either parent have a bachelor's degree: Y N Unknown Are you a veteran: Y N <input type="checkbox"/> I am applying for VA benefits Under what program/chapter _____	Educational goals: <input type="checkbox"/> personal enrichment <input type="checkbox"/> improve skills <input type="checkbox"/> certificate <input type="checkbox"/> get a better job <input type="checkbox"/> associate's degree <input type="checkbox"/> try out college <input type="checkbox"/> bachelor's degree <input type="checkbox"/> take course & transfer <input type="checkbox"/> master's degree <input type="checkbox"/> other
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Have you ever been convicted of a felony? Y N If yes, attach explanation

Do you have physical, psychological, or learning disabilities that may require special services or access that you would like to disclose at this time: Y N

Explain: _____

If you will require special services and would rather discuss this with a learning specialist directly, call (802) 728-1278.

COURSE REGISTRATION

Course number & Section	Title	Campus location, VIT site or on-line	Credits

Students receiving payment from a third party or voucher payments after grades are released should contact the Business Office at 802-728-1301 to see if you are eligible to defer your payment.

High school students must have a voucher, approval letter from their school and/or take placement.

I certify that I have read and acknowledge the statements on the reverse side of this form and that all information provided by me is correct.

Student signature: _____

Date: _____

Name (last, first, middle initial) _____ Student ID or SSN _____

STATEMENTS OF UNDERSTANDING

A. The College reserves the right to make changes in course offerings, charges, regulations, and procedures as educational and financial considerations require. _____

Initial and date

B. I agree that if this account is not paid when due, I agree to pay all costs of collections including interest, attorney's fees and collection agency fees, and other costs related to the collection of my account. _____

Initial and date

C. I understand that providing false information on this registration form could result in denial of admission to courses or, if already admitted, expulsion from the College. _____

Initial and date

D. In accordance with Vermont Statutes Annotated, Title 16, Statute 176, Section 1 (C): I understand that credits earned at the Vermont State Colleges are transferable only at the discretion of the receiving school. _____

Initial and date

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT

The Family Educational and Privacy Act (FERPA) is a federal law designed to protect the privacy of student educational records. The law gives eligible students, those who have reached the age of 18, or the parents of students under the age of 18, certain rights with respect to their education records. Students have the right to inspect and review all of their educational records maintained by the college. If parents/guardians claim a student as a dependent, they may have access to the student's educational records without prior written consent. Students have the right to request that the college correct **academic records** believed to be inaccurate or misleading. If the college decides not to amend the record, the student then has the right to a formal hearing. After the hearing, if the college still decides not to amend the record, the eligible student has the right to place a statement with the record commenting on the contested information in the record.

Generally, the college must have written permission prior to releasing any **academic information** from a student's record. However, the law allows the college to disclose records without consent, to the following parties:

- College employees who have a need to know;
- Other schools to which the student is applying;
- Certain government officials in order to carry out lawful functions;
- Appropriate parties in connection with financial aid to a student;
- Parents of dependent eligible students;
- Organizations conducting studies for the college;
- Accrediting organizations;
- Individuals who have obtained court orders or subpoenas;
- Persons who need to know in cases of health and safety emergencies; and state and local authorities, within the justice system, pursuant to specific state law.

Students have the option of completing an online form in Web Services that provides parents or others with access to their academic records and an access code for them to provide when seeking information either in-person or on the phone. This access does not include transcript requests, grade reports or enrollment verifications; these must be individually requested by the student.

DIRECTORY INFORMATION

The college may also disclose, without consent, "**directory type information**" that is considered not to be harmful to student/parent if released. The information considered by the college to be directory information is name, home and college address, telephone listing, email address, date of birth, major, enrollment status (full-time or part-time), enrollment level (undergraduate or graduate), dates of attendance, degrees and awards received, weight and height of athletic team members, photographs, most recent and previous educational institutions attended, and participation in officially recognized activities and sports. Parent information is not directory information.

Students have the right to withhold the release of any or all directory information, to do so a written request must be made at the Office of the Registrar.

For additional information or to file a complaint, you may contact the **Family Policy Compliance Office at (202) 260-3887** or om@ed.gov or US Department of Education, 400 Maryland Ave, SW, Washington, DC 20202-4605.