Legal Name: Last ____________________________ First ____________________________ MI ____________

Address: ____________________________________________________________ Social Security ____________

City: ____________________________ State: ____________ Zip: ____________ County: ____________________________

Telephone: (H) ____________________________ (W) ____________________________

Email: ________________________________________________________________

Birth date: _______________ Gender: Male ☐ Female ☐

Month / Day / Year

High School Attended ____________________________ Year Graduated ____________

College Attended ____________________________ Year Graduated ____________

Semester: SPRING 2015

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<th>Class Title</th>
<th>Course Prefix</th>
<th>Course Number</th>
<th>Section</th>
<th>Cost</th>
<th>Total Cost</th>
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Student Signature: ____________________________

Date: ________________

The information collected in this section is used to comply with federal and state reporting requirements.

Ethnicity:
- Hispanic or Latino Ethnicity ☐ Yes ☐ No

Race: (Select all that Apply)
- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

Primary Racy/Ethnic Group: (Select One)
- American Indian or Alaska native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- White
- Choose Not to Respond

Highest Diploma/Degree Earned
- None
- High School
- GED
- Some College
- Certificate
- Associate Degree
- Bachelor’s Degree
- Master’s Degree
- Professional
- Doctoral
- Other