



# Concurrent Enrollment Program Registration Form

Name: \_\_\_\_\_  
(Last) (First - Legal) (Middle Name) (Nickname)

## Address Information

\_\_\_\_\_  
(Street) (City) (St) (Zip)

Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Concurrent Enrollment: LEAD 100 Leadership Studies** at the following Green Bay High School

\_\_\_\_ East High School \_\_\_\_ Preble High School \_\_\_\_ Southwest High School \_\_\_\_ West High School

Previous SNC Enrollment: Have you ever taken a course through SNC before? \_\_\_\_ No \_\_\_\_ Yes

\_\_\_\_-\_\_\_\_-\_\_\_\_ Date of Birth: \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Social Security Number (Month) (Day) (Year)

The following information is used by SNC for federal reporting purposes and is required for registration.

Indicate Sex: \_\_\_\_ Male \_\_\_\_ Female

Indicate Ethnicity: \_\_\_\_ Not Hispanic or Latino \_\_\_\_ Hispanic or Latino

Indicate Race(s): \_\_\_\_ American Indian \_\_\_\_ Asian \_\_\_\_ Black or African American  
(check one or multiple boxes) \_\_\_\_ Hawaiian/Pacific Islander \_\_\_\_ White

We understand that the student listed above is interested in enrolling in coursework with St. Norbert College. We also feel the student is capable of handling college level work.

\_\_\_\_\_  
(Principal) (Date)

\_\_\_\_\_  
(Counselor) (Date)

We understand the time commitment involved in college level work and support our child's choice. We also understand we are responsible for tuition, books, and related fees.

\_\_\_\_\_  
(Student Signature) (Date) (Parent Signature) (Date)

**ALL OF THE ABOVE INFORMATION IS REQUIRED BEFORE REGISTRATION CAN BE PROCESSED**

Office Use Only

\_\_\_\_ UG-C-O-NG-ND  
\_\_\_\_ ADV  
\_\_\_\_ RNSC

LEAD100 \_\_\_\_\_ SNCIDN: |\_0\_|\_0\_|\_0\_|\_\_\_\_\_  
CRN

Return completed registration form to:

Jeanne Lucier, Concurrent Enrollment Program, St. Norbert College, 100 Grant Street, De Pere, Wisconsin 54115-2099.