WAKE TECH
COMMUNITY COLLEGE

WORKFORCE DEVELOPMENT REGISTRATION
9101 Fayetteville Road, Raleigh, North Carolina 27603-5696 919-866-5800

Course: _____ _____
Section Number   Title

Instructor: _____ **Location:** _____ **Date:** _____ _____
                                                                            Begin   End

*Last 4 digits of SSN   xxx-xx-_____
Or College ID#: _____   **(*used only to retrieve current/former student record)**

Name: _____ _____ _____
            Last   First   Middle

Address: _____ _____ _____ _____
            Street, P.O. Box, Route   City   State   Zip Code

County of Residence: _____ **Date of Birth:** _____ _____ _____
                                                             Month   Day   Year

E-mail Address: _____ **Home Phone:** _____

Please Check: **Sex:**   ☐ 1. Female   ☐ 2. Male

Ethnicity: ☐ 1. Hispanic/Latino   **Race:**   ☐ 1. American/Alaska Native   ☐ 2. Asian   ☐ 3. Black or African American
               ☐ 2. Non Hispanic/Latino   ☐ 4. Hawaiian or Pacific Islander   ☐ 5. White

Check the **highest education level** that best describes you:

☐0   ☐1   ☐2   ☐3   ☐4   ☐5   ☐6   ☐7   ☐8   ☐9   ☐10   **Military Status:**

☐ 11	(Highest Grade Completed – Non-high School Graduate)	☐ 14 Post High School Vocational Diploma	☐ Active
☐ 12	(High School Graduate)	☐ 15 Associate Degree	☐ Reserve
--	GED	☐ 16 Bachelor's Degree	☐ Discharged
☐ 13	Adult High School Diploma	☐ 17 Master's Degree or Higher	☐ Retired

Employment: ☐ Full-Time (FT)   ☐ Part-Time (PT)   ☐ Retired (R)
                       ☐ Unemployed – Not Seeking (UN)   ☐ Unemployed – Seeking (US)   ☐ Inmate

Employer: _____ **Business Phone:** _____

Employer's Address: _____

Student Signature: _____ **Date:** _____

Payment:
     Fees: $** _____ **$ _____
               Registration   Total Amount

No confirmation will be sent.
You will be notified only if the class is full or cancelled.

     Total Payment:
       $ _____ **Check one:**   ☐ *Check   ☐ *Money Order

      *Make check or money order payable to: **Wake Technical Community College**

For your financial security, credit card information is not accepted via mail-in registration.
To register and pay online, go to workforce.waketech.edu

Disability Support Services (DSS) is available for students who require disability accommodations.
To determine eligibility, contact DSS at 919-866-5670 (TTY 779-0668).

FOR OFFICIAL USE ONLY

Fees: $ _____ $ _____
                    Registration   Total Amount

	Class is Full		Class was Canceled

AN EQUAL OPPORTUNITY INSTITUTION

Form 473 R-33 (3-31-23) TN/AC