

REGISTRATION FORM

Remove this entire page and mail. See instructions on reverse side. Please print clearly your information below.

- 1. Full Name _____
- 2. Address _____ City _____ State _____ Zip _____
- 3. County of Residence _____ 4. Date of Birth _____
- 5. Home Telephone (_____) _____ - _____ 6. Cell Phone (_____) _____ - _____
- 7. E-mail _____
- 8. Sex Male Female
- 9. Social Security Number _____ 10. Ethnicity Hispanic Non-Hispanic
- 10. Race American Indian/Alaskan Native Asian Black/African American
 Hawaiian/Pacific Islander White
- 11. Citizenship: U.S. Citizen Eligible Legal Alien Non-Resident Alien
- 12. Employment Status Unemployed Full Time Part Time
- 13. Last School Attended _____ Last Grade Completed _____
- 14. Student Signature _____ Date _____
- 15. I am also interested in: Online Program Traditional Classes English as a Second Language (ESOL)

LESSON 1 ANSWER FORM:

- Carefully remove this page from booklet.
- Follow instructions for folding/ mailing on reverse side.
- Tape flap.
- Mail.

We will correct your answers and return them to you. **Save your copy of the lesson for reference.** Some lesson material will be needed in later lessons.

Name _____

MATH

- 1. _____ 5. _____
- 2. _____ 6. _____
- 3. _____ 7. _____
- 4. _____ 8. _____

LANGUAGE ARTS

- 1. _____ 4. _____
- 2. _____ 5. _____
- 3. _____ 6. _____

SOCIAL STUDIES

- 1. _____ 3. _____
- 2. _____

Please follow step-by-step instructions!

1. FOLD BACK ON LINES

NAME

ADDRESS

CITY STATE ZIP

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

PERMIT NUMBER 2000

JAMESTOWN, NC

POSTAGE WILL BE PAID BY ADDRESSEE

Guilford Technical Community College
Adult Education HP Campus
PO Box 309
Jamestown, NC 27282

2. FOLD BACK ON LINES

**Be sure this opening is at the TOP of
the envelope!**

3. TAPE FLAP HERE