

FLORENCE-DARLINGTON TECHNICAL COLLEGE

CORPORATE & WORKFORCE DEVELOPMENT

	COUNSE	REGISTRATION	ORIVI
STUDENT INFORMATION			
Name		DOB	SSN
Mailing address			
City	State	Zip code	County
Hispanic Non-Hispan	ic Race		Gender: Male Female
Desired course		Start date	Location
Employment: Not employ	yed 🔲 Emplo	oyed 🔲 Employed in	Field of Study
Disabled: Yes No Ve	eteran: 🗌 Ye	s 🗌 No	
Prior Education: High Sch	ool Diploma	GED Associate	's Degree Bachelor's Degree
DECLARATION OF CITIZEN	SHIP		
unlawfully present in the United St from receiving a public higher edu	ates from atten ucation benefit.	ding a public institution of By signing this statement	1-430 (Westlaw 2008)) prohibits those of higher education in South Carolina and it you attest that you are a U.S. citizen, a legal United States. In addition, the college may
require you to submit documenta	tion that suppo	rts your claim. Any studer	nt providing false information may be subject esent in the United States will be dismissed
Print name		Signature _	
Date DO	DB	Driver's	license #
Driver's license issue date _			
PAYMENT METHOD Cash Check Credit Type of credit card: Visa	MasterCa	ırd 🗌 American Expr	
Card number Card expiration date		Card ID (2 numbers	an back)
•			
If sponsorship, name of spo			
	forts. I understo	ınd that if I do not want m	ical College to use my name and photograpl by image used for these purposes, it is my rom the area being captured.
COURSE INFORMATION (
Number		Title	
Meeting date(s)		Campus	Price
Revised 4/1/24			