



1202 W. Thomas Road  
 Phoenix, AZ 85013-4234  
 Admissions (602) 285-7502  
 Advisement (602) 285-7110  
 FAX (602) 285-7813

# REGISTRATION/ADVISEMENT FORM

PLEASE COMPLETE ALL ITEMS BEFORE SUBMISSION

LEGAL NAME (LAST, FIRST, MIDDLE)		SEMESTER OF ENROLLMENT 20 ____	
STUDENT NUMBER (SS#) <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="checkbox"/> FALL	<input type="checkbox"/> SUMMER 1
		<input type="checkbox"/> SPRING	<input type="checkbox"/> SUMMER 2
		<input type="checkbox"/> FALL EXPRESS	<input type="checkbox"/> SPRING EXPRESS
MAILING ADDRESS			APT#
CITY	STATE	ZIP CODE	
HOME PHONE	BUSINESS PHONE	EXT.	
PROGRAM OF STUDY (See other side) _____			

**ENROLLMENT REQUEST\*\* – Must be signed by an advisor for students who are:**

- A. Pursuing a certificate or degree
- B. Applicants for Financial Aid
- C. Enrolling in any EMT/FSC/IGS/and Special Permission courses

	SUBJECT CODE	SECTION CODE	DAYS	TIME		CREDIT HOURS
				BEGIN	END	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

<b>Special note about repeating a course.</b> If you are repeating a course for a better grade, it is your responsibility to notify Admissions and Records.	<b>TOTAL CREDIT HOURS</b> <b>**Academic Load over 18 Credit Hours–MUST have GPA of 3.0 or better in preceding semester</b>
---	---

**STUDENT EMISSIONS TESTING AFFIDAVIT**

In accordance with Arizona Revised Statutes 15-1444 and 15-1449, I hereby certify (check one):

- \_\_\_\_\_ That my vehicle as required by Arizona Revised Statutes 49-542 has passed its vehicle emissions test.
- \_\_\_\_\_ That A.R.S. 49-542 is not applicable to a motor vehicle or a motorcycle I drive.
- \_\_\_\_\_ That I do not park a vehicle on college property.

Unless eligible for waiver, I understand that if I fail to comply with the requirements of the emissions inspection program, I am prohibited from parking on college property and that my vehicle is subject to being towed away at my expense.

**REQUIRED SIGNATURES**

STUDENT SIGNATURE _____ DATE _____ <small>Students are strongly encouraged to consult an advisor prior to registration. Students registering without a signature are responsible for their own course selection(s).</small>	**ADVISOR SIGNATURE _____ DATE _____ **19-21 CREDITS-ADVISOR SIGNATURE _____ DATE _____ OVER 21 CREDITS (DEAN OR DESIGNEE SIGNATURE) _____ DATE _____
--	---