

## FIRST DAY ATTENDANCE REGISTRATION FORM

Office Use							
Initials							
Date							

Student ID#	dent ID# DATE								
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the right to deny admission to a course based on success factors. This form is required to be submitted to the Student Records Office before 11:00 a.m. on the 1 <sup>st</sup> Friday of the term (January 15 for spring 2021.) No late forms will be accepted. SRO Fax# is 419-755-4729 and email is studentrecords@ncstatecollege.edu.									
COUR	SE NO.	SECTION		FACULTY SI	GNATURE			COURSE NO.	SECTION
(i.e. E	NG101)	(i.e. 01)		DATE AN	D TIME			(i.e. ENG101)	(i.e. 01)
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ADVISOR SIGNATURE:  REQUIRED FOR NEW, RE-ENTERING, DIRECTIONS, CCP AND PROBATION STUDENTS  Students are responsible for meeting all course pre-requisites and following the curriculum procedures									
and policies outlined in the NC State College Catalog.  Payment for my tuition, lab and contact hour fees for the above classes will be provided by the following method (Initial One):  Payment in full by cash, check or credit card (Contact Cashiers Office)  Deferred Payment Plan (Contact Cashiers office immediately following class registration)  Financial Aid (grants, student loans, scholarships)  Third party payment  (please specify name of third party)  CCP Student									
North Central State College is a non-profit institution of higher learning. As such, student receivable accounts are considered to be educational loans offered for the sole purpose of financing an education and are not dischargeable under bankruptcy proceedings.									
All tuition, lab and contact hour fees not covered by Financial Aid or a third party, are my financial responsibility. Payment arrangements must be made upon registration, but no later than 4pm on Friday of the 1st week of the term. Failure to make payment arrangements with the Cashier's office by the deadline date will result in the student's schedule being voided for the current and subsequent periods. Cashier # is 419-755-4722.									
Any student receivable amounts outstanding will be turned over to the State of Ohio Attorney General's Office for further collection.									
I have read and agree to the statements made above.									
STUDENT SIGNATURE: DA			DATE:						