



REGISTRATION FORM

Fill out the registration form completely. You will need to provide the course name, course number and section number of the class(es) you wish to enroll. Accuracy of the name and numbers is important to secure your enrollment. A signature is required for processing!

TODAY'S DATE:	I HAVE ATTENDED SWTC PREVIOUSLY: <input type="checkbox"/> Yes <input type="checkbox"/> No	I AM REGISTERING FOR: <input type="checkbox"/> Summer Semester <input type="checkbox"/> Fall Semester <input type="checkbox"/> Spring Semester	
LAST NAME:	FIRST:	MIDDLE:	PREVIOUS NAME:
SOCIAL SECURITY NUMBER:	DATE OF BIRTH (MM/DD/YYYY):	GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female	STUDENT ID (IF KNOWN):
STREET ADDRESS/PO BOX:		CITY, STATE, ZIP:	
EMAIL ADDRESS:	MOBILE PHONE: () -	ALTERNATE PHONE: () -	
I AM A LEGAL RESIDENT OF – COUNTY & STATE:		<input type="checkbox"/> CITY/ <input type="checkbox"/> VILLAGE/ <input type="checkbox"/> TOWNSHIP (CHECK ONE AND WRITE NAME):	
NAME OF LAST HIGH SCHOOL ATTENDED:		CITY, COUNTY, & STATE:	GRADUATED (YEAR & MONTH):
HIGHEST GRADE COMPLETED: <input type="checkbox"/> Did not attend School <input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 12+			
HIGHEST CREDENTIAL EARNED: <input type="checkbox"/> No Credential <input type="checkbox"/> GED <input type="checkbox"/> HSED <input type="checkbox"/> High School Diploma <input type="checkbox"/> Some College <input type="checkbox"/> Short-term Diploma <input type="checkbox"/> 1yr Diploma <input type="checkbox"/> 2yr Diploma <input type="checkbox"/> Associate Degree <input type="checkbox"/> Associate Degree plus Additional Credential <input type="checkbox"/> Baccalaureate <input type="checkbox"/> More than Baccalaureate			
RACE/ETHNICITY: The following questions are confidential. Your responses will help the technical college evaluate recruitment and retention practices and will not affect admission to the college. Please respond to both questions. Are you Hispanic or Latino (that is, a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race)? <input type="checkbox"/> Yes <input type="checkbox"/> No Select any other group or groups that apply to you. (Check all that apply). <input type="checkbox"/> American Indian or Alaska Native. A person whose ancestors include native peoples of North and South America (including Central American), and who maintains a tribal affiliation or community attachment. <input type="checkbox"/> Asian. A person whose ancestors include native peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. <input type="checkbox"/> Black or African American. A person whose ancestors include any of the black racial groups of Africa. <input type="checkbox"/> Native Hawaiian or other Pacific Islander. A person whose ancestors include the native peoples of Hawaii, Guam, Samoa, or other Pacific Islands. <input type="checkbox"/> White. A person whose ancestors include native peoples of Europe, the Middle East, or North Africa.			
COURSE NAME	COURSE NUMBER	SECTION NUMBER	
FEES PAID BY: <input type="checkbox"/> Self (See payment information on back) <input type="checkbox"/> Agency/Other <input type="checkbox"/> Employer		Agency or Employer: _____ Contact Person: _____ Address: _____ Phone & Email: _____	
I have read and agree to the policies on the back of this form.			
SIGNATURE:		DATE:	

PLEASE READ CAREFULLY:

Enrollment in classes is on a first-come, first-serve basis. This means that students hold a spot in class only when the paperwork has been received and processed, and there are available seats in the course. Once you have been registered for the course, you will receive an email confirmation at the address provided on your registration form and at your Southwest Tech email address. You can also verify enrollment by contacting the Records Office at 608-822-2634 or by accessing your MySWTC account. Instructions for accessing SWTC email and MySWTC can be found at <https://portal.swtc.edu/student/login.asp>. You will be contacted via email with any changes to your enrollment.

Your tuition statement will be sent to you via e-mail only. Payment in full is due prior to the start of the term.

Following are payment options:

- 1) Pay online at MySWTC. ACH, MC,VISA or Discover are accepted.
- 2) Payment via phone by calling 608-822-2660.
- 3) Pay in person at the Business Office during normal business hours. Please call to verify.
- 4) Pay by mail with a check or money order mailed to: Southwest Tech; Attn: Business Office; 1800 Bronson Blvd; Fennimore, WI 53809.

If billing to an agency or business, write in the name of the agency/business, the name of the contact person, address, phone and email. We cannot bill an agency or business without written authorization from that agency/business. Attach the authorization to this registration form.

DISCLOSING YOUR SOCIAL SECURITY NUMBER: Internal Revenue Service (IRS) Code 1.6050S requires Southwest Tech to request your social security number (SSN), or your individual tax identification number (ITIN) for the issuance of Form 1098-T, Tuition Payment Statement. For each calendar year, the 1098-T is used to report qualified tuition and fees to both students and the IRS. Failure to furnish a SSN for your 1098-T, according to Section 6723 of the IRC, may result in fines, but it will not prevent admission to the college.

WISCONSIN RESIDENTS AGE 60 AND OVER: In accordance with the provisions of 1999 Wisconsin Act 154, students age 60 and older may be exempt from some fees for certain courses. If you are a Wisconsin resident age 60 or older, not taking classes for college credit to be used toward a degree, and would like more information about this option, please contact the Business Office at 608.822.2660.

REFUND POLICY: Southwest Tech’s tuition and fee refund policy is in accord with Wisconsin Technical College System and District Board policy guidelines. As a general rule, students are responsible for requesting any refund of tuition and/or fees paid to Southwest Tech. Refunds under \$5 will not be processed.

Adding or withdrawing from a course requires timely submission of appropriate paperwork to Student Services. Students can officially withdraw from a course upon notifying Student Services in writing or in person. The date of notification of withdrawal, not the last date of class attendance, is the official withdrawal date, which is used to determine the amount of a student's refund. Non-attendance does not reduce fees owed. Further, officially withdrawing from a course or courses does not eliminate a student's responsibility for any outstanding financial obligation to the College. (Students who entirely withdraw from school are encouraged to contact their Success Coach for an exit interview.)

Refunds before First Class Meeting. If Southwest Tech cancels a course, students can apply for a complete refund of tuition paid. Students who drop a course before the first class meeting will receive a full refund of tuition paid. When one class is dropped and another added during the first seven calendar days of the term, the tuition payment is transferred from the dropped course to the added one.

Refunds after the First Class Meeting: All Courses except Open Entry Courses. Once a term begins, the refund amount for a course is based on the official withdrawal date relative to the number of days the class has met. (The refund period begins the first day a course meets, not the first day a student attends it.) The applicable schedule is as follows:

Refunds after the First Class Meeting: Open Entry Courses. With open entry courses, the amount of a refund is determined by the number of calendar days between a student’s registration date and official withdrawal. The applicable schedule is as follows:

Official Course Withdrawal	Fee Refunded	Official Course Withdrawal	Fee Refunded	Percent of Total
Before 11% of the class meetings	80%	1–7 days after official registration date	80%	
Between 11–20% of the class meetings	60%	8–14 days after official registration date	60%	
After 21% of the class meetings	0%	15 days after official registration date	0%	

NOTICE TO APPLICANT: It is the District policy to maintain fair and impartial relations with employees and applicants for employment, and students and student applicants in any service, program, activity, course, or use of facilities on the basis of sex, age, race, color, creed, religion, national origin, disability, ancestry, political affiliation, marital status, pregnancy, sexual orientation, parental status, arrest record, conviction record, genetic testing, and the use and non-use of lawful products off the premises during nonworking hours, and membership in National Guard, State Defense Force, or other military forces of the United States. Lack of English reading/speaking skills, will not be a barrier to admission and participation in district programs.

It is the policy of Southwest Tech to not discriminate on the basis of disability in the admission or access to or treatment in its programs or activities. Students with disabilities who need accommodations should contact the Support Services Specialist, Southwest Wisconsin Technical College, 800-362-3322, Ext. 2631, email accom@swtc.edu or TTY/TDD 608-822-2072.



The following information is being collected by this college in conjunction with state mandates on client reporting. This means that we are required by the State to collect and report this information to them. This information is strictly confidential and does not affect any aspect of a student's college experience. Please check which best fits you at the time of your enrollment in our college:

NAME: _____

SOCIAL SECURITY #: _____

DATE OF BIRTH: _____

STUDENT ID: _____

1. WORK STATUS AT ENROLLMENT (Employed means working for compensation - it does not include volunteer activities)

- Employed, full-time.
- Employed, part-time.
- Underemployed - Employed full-time or part-time but the job duties are materially below his/her qualifications.
- Unemployed, seeking employment (excluding dislocated workers).
- Not in labor market (excluding dislocated workers).
- Dislocated Worker - Been terminated or laid off or received notification of termination or layoff, **and** is eligible or has exhausted entitlement to unemployment compensation, **and** is unlikely to return to his/her pervious industry/occupation.

2. DISPLACED HOMEMAKER (Have worked at home without pay to care for the family, are no longer supported by a relative's income or whose youngest dependent child will become ineligible for TANF assistance within two years, and are unemployed or underemployed.)

- Yes No

3. SINGLE PARENT (Unmarried or legally separated and have custody or joint custody of one or more minor children or who are pregnant)

- Yes No

4. ECONOMICALLY DISADVANTAGED (Any individual or member of a family who received TANF, food stamps or whose income is at or below the poverty level as defined by the Dept. of Commerce. If your family income is at or below the amount listed under your family size, check YES.)

Family Size:	1	2	3	4	5	6	7	8*
Income:	\$12,140	\$16,460	\$20,780	\$25,100	\$29,420	\$33,740	\$38,060	\$42,380

(*Add \$4,320 for each additional family member.)

- Yes No

5. PERSON WITH DISABILITY (If yes, please identify primary disability below Refer to the next page of this form for more detailed information.)

- Deaf
- Deaf-Blind
- Hard of Hearing
- Cognitive Disability
- Multi Disabled
- Mobility and/or Orthopedic Disability
- Other Health Impaired
- Psychological Disability
- Specific Learning Disability
- Speech or Language Disability
- Visual Disability
- Autism Spectrum Disorder (ASD)
- Traumatic Brain Injury
- Primary Disability

6. HIGHEST DEGREE EARNED BY A PARENT

- None
- Associate Degree/Technical Diploma/Technical Certificate
- Master's Degree/Doctorate Degree (More than 4 Years)
- High School Diploma/HSED/GED
- Bachelor's Degree (4 Year)

7. MARITAL STATUS

- Common-Law
- Divorced
- Head of Household
- Married
- Separated
- Single
- Widowed

CONFIDENTIALITY

Information collected via this system will NOT be released in any form, which allows for identification of specific clients except to statutorily authorize agencies. This determination is to be made by the state office's public records officer. The Wisconsin Technical College System Board is required to collect demographic data on individuals who receive services, including course offerings, from the Wisconsin Technical College districts. This information is necessary to meet accountability requirements, conduct oversight and regulatory analysis, produce reports detailing who received services from Technical College districts and to continue to be eligible for state and federal funding.

Data identifying the need for special services (e.g., handicapped, disadvantaged, single parents) must be collected and reported for all individuals who are eligible for services. The information collected via this system creates a database to measure need, account for expenditure of funds and justify requests for continued and/or increased funding.

Reference for Question #5

- 01 = Deaf** - A hearing impairment which is so severe that an individual is impaired in processing linguistic information through hearing, with or without amplification, which adversely affects educational performance.
- 02 = Deaf-Blind** - Deaf-Blind means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs. Multiple services / accommodations may be necessary. [34 CFR 300.8(c)(2)].
- 03 = Hard of Hearing** - A hearing impairment, whether permanent or fluctuating which adversely affects an individual's educational performance but which is not included under the definition of "deaf."
- 04 = Intellectual Disability** - Intellectual disability means significantly sub average intellectual functioning that exists concurrently with deficits in adaptive behavior and that adversely affects educational performance. [Wis. Admin. Code, s. PI 1.36(1)].
- 05 = Multi Disabled** - Simultaneous impairments (such as cognitive disability / blind, specific learning disability / orthopedically impaired, etc.), the combination of which causes severe educational problems and may require multiple services and accommodations. The term does not include deaf-blind individuals.
- 06 = Mobility and/or Orthopedic Disability** - Orthopedic impairment means a severe orthopedic impairment that adversely affects a person's educational performance. The term includes, but is not limited to, impairments caused by congenital anomaly, such as clubfoot, or absence of some member; impairments caused by disease, such as poliomyelitis or bone tuberculosis; and impairments from other causes, such as cerebral palsy, amputations, and fractures or burns that cause contractures. [Wis. Admin. Code PI 11.36(2)].
- 07 = Other Health Impairment** - Other health impairment means having limited strength, vitality or alertness, due to chronic or acute health problems. The term includes but is not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, drug / alcohol disabilities, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, or acquired injuries to the brain caused by internal occurrences or degenerative conditions which adversely affects a person's educational performance. [Wis. Admin. Code PI 11.36(10)] [Also, it includes any individual who is determined to have a disability under the Americans with Disabilities Act (ADA) of 1990 or Americans with Disabilities Amendments Act (ADAAA) which is not reportable under another code.].
- 08 = Psychological Disability** - Includes a variety of disabilities which affect a student's mental or emotional state. Examples include persons with anxiety disorders, chronic depression, personality disorders, and many other categories of mental and emotional disability identified in the American Psychiatric Association's Diagnostic and Statistical Manual (DSM V).
- 09 = Specific Learning Disability** - Specific learning disability, pursuant to s. 115.76(5)(a)10., Wis. Stats., means a severe learning problem due to a disorder in one or more of the basic psychological processes involved in acquiring, organizing or expressing information that manifests itself in school as an impaired ability to listen, reason, speak, read, write, spell or do mathematical calculations, despite appropriate instruction in the general education curriculum. Specific learning disability may include conditions such as perceptual disability, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. [Wis. Admin. Code PI 11.36(6)].
- 10 = Speech or Language Disability** - Speech or language disability means an impairment of speech or sound production, voice, fluency, or language that significantly affects educational performance or social, emotional or vocational development. [Wis. Admin. Code PI 11.36(5)].
- 11 = Visual Disability** - Visual disability means even after correction a person's visual functioning significantly adversely affects the person's educational performance. [Wis. Admin. Code PI 11.36(3)]. Visual disability includes a wide variety of vision problems including, but not limited to, total blindness. Examples include cataract, glaucoma, and retinitis pigmentosa.
- 12 = Autism Spectrum Disorder** - Autism Spectrum Disorder (ASD) means a developmental disability significantly affecting a person's social interaction and verbal and nonverbal communication that adversely affects learning and educational performance. Other characteristics often associated with ASD are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. ASD does include persons with autism, Asperger's Syndrome, and Rett's Disorder. [Wis. Admin. Code s. PI 11.36(8)].
- 13 = Traumatic Brain Injury** - Traumatic brain injury means an acquired injury to the brain caused by an external physical force resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a person's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; speech and language; memory; attention; reasoning; abstract thinking; communication; judgment; problem solving; sensory, perceptual and motor abilities; psychosocial behavior; physical functions; information processing; and executive functions, such as organizing, evaluating and carrying out goal directed activities. The term does not apply to brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma. [Wis. Admin. Code PI 11.36(9)].
- 98 = Primary Disability** - This is to be used for clients who self-identify themselves as having a disability.