



**WORKFORCE CONTINUING EDUCATION  
REGISTRATION**  
9101 Fayetteville Road, Raleigh, North Carolina 27603-5696 919-866-5800

**Course:** \_\_\_\_\_  
Section Number Title

**Instructor:** \_\_\_\_\_ **Location:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Begin End

**\*Social Security # or College ID#:** \_\_\_\_\_ **(\*Used for reporting purposes only)**

**Name:** \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_  
Street, P.O. Box, Route City State Zip Code

**County of Residence:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
Month Day Year

**E-mail Address:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Please Check:** Sex:  1. Female  2. Male  
 Ethnicity:  1. Hispanic/Latino  2. Non Hispanic/Latino  
 Race:  1. American/Alaska Native  2. Asian  3. Black or African American  
 4. Hawaiian or Pacific Islander  5. White

Check the **highest education level** that best describes you:  
 0  1  2  3  4  5  6  7  8  9  10  
 11 (Highest Grade Completed – Non-high School Graduate)  12 (High School Graduate)  13 Adult High School Diploma  
 14 Post High School Vocational Diploma  15 Associate Degree  16 Bachelor's Degree  17 Master's Degree or Higher  
**Military Status:**  Active  Reserve  Discharged  Retired

**Employment:**  Full-Time (FT)  Part-Time (PT)  Retired (R)  
 Unemployed – Not Seeking (UN)  Unemployed – Seeking (US)  Inmate

**Employer:** \_\_\_\_\_ **Business Phone:** \_\_\_\_\_

**Employer's Address:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Payment:**  
 Fees: \$ \_\_\_\_\_ \$ \_\_\_\_\_  
Registration Total Amount

**No confirmation will be sent.  
 You will be notified only if the class is full or cancelled.**

**Total Payment:** \$ \_\_\_\_\_ **Check one:**  \*Check  \*Money Order

**\*Make check or money order payable to: Wake Technical Community College**  
**For your financial security, credit card information is not accepted via mail-in registration.**  
**To register and pay online, go to [workforce.waketech.edu](http://workforce.waketech.edu)**

Disability Support Services (DSS) is available for students who require disability accommodations.  
 To determine eligibility, contact DSS at 919-866-5670 (TTY 779-0668).

**FOR OFFICIAL USE ONLY**

**Fees:** \$ \_\_\_\_\_ \$ \_\_\_\_\_  
Registration Total Amount

Class is Full  Class was Canceled

**AN EQUAL OPPORTUNITY INSTITUTION**

White – Registrar Yellow – WCE Class File