



**WORKFORCE SOLUTIONS  
STUDENT REGISTRATION FORM**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Student ID#** \_\_\_\_\_

If you have taken classes with one of the 13 colleges in the Colorado Community College System in the past, you will have a number. If you know your "S" number, please enter it here. If you have never had a number or cannot remember your number, you will need to include your Social Security number in the section below. If you are uncomfortable sending the number electronically, please return the form with that line blank and then call Donna at 719-846-5724 and speak with her directly.

**Social Security Number:** \_\_\_\_\_

**Maiden name if applicable:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Male** \_\_\_\_ **Female** \_\_\_\_

**Home mailing address:** \_\_\_\_\_  
Number/Street                      City                      State                      Zip Code

**Phone Number:** Work \_\_\_\_\_ Personal \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Name of your employer:** \_\_\_\_\_

**Current Employment Status:** Full time (30+ hours/week) \_\_\_\_ Part time (1-29 hours/week) \_\_\_\_

Have you attended Trinidad State in the past? Yes \_\_\_\_ No \_\_\_\_

**Please check/complete the items below if applicable**

**Veteran/Military service**

Veteran or Dependent \_\_\_\_ Military Reserves \_\_\_\_ Active-Duty Military \_\_\_\_

List Branch of Service \_\_\_\_\_

**Which best describes the level of education you have completed?**

Less than high school \_\_\_\_\_ High school graduate \_\_\_\_\_ Earned a GED \_\_\_\_\_

College certificate \_\_\_\_\_ Associate's degree \_\_\_\_\_ Bachelor's degree \_\_\_\_\_ Master's degree \_\_\_\_\_

**Do you consider yourself economically disadvantaged?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Is English your second language?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Ethnicity:**

Hispanic or Latino \_\_\_\_\_ Not Hispanic or Latino \_\_\_\_\_

**Race:**

American Indian or Alaskan Native \_\_\_\_\_ Asian \_\_\_\_\_ Black or African American \_\_\_\_\_

Native Hawaiian or Pacific Islander \_\_\_\_\_ White \_\_\_\_\_

**Citizenship:** U.S. Citizen \_\_\_\_\_ Non U.S. Citizen \_\_\_\_\_

Check here if you are a single parent \_\_\_\_\_

Check here if neither of your parents completed a Bachelor's degree \_\_\_\_\_

Did you start a certificate or degree in the past that you did not complete? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please check here if you would like to speak to an advisor about completing what you started \_\_\_\_\_

Please download and sign the Student Payment Agreement and return it to Donna Haddow at

[donna.haddow@trinidadstate.edu](mailto:donna.haddow@trinidadstate.edu). This form is required of all students regardless of who is paying the bill.

<https://trinidadstate.edu/fia/pdf/studentpaymentagreement.pdf#search=student%20payment%20agreement>

If you have any questions while completing this form, please contact Donna

At 719-846-5724 or [donna.haddow@trinidadstate.edu](mailto:donna.haddow@trinidadstate.edu)