

**LAKE TAHOE COMMUNITY COLLEGE  
LONDON FALL 2002 REGISTRATION INSTRUCTIONS**

**A. Eligibility**

Both continuing and new students may register by mail after downloading this form. Classes will be filled on a first come, first served basis.

**THE DEADLINE FOR LONDON REGISTRATION  
IS FRIDAY, SEPTEMBER 13TH, 2002.**

**B. Completing the London Registration Form:**

1. Answer all questions on the registration form.
2. Enter Course # (example "BSN 100-3), Title (example "Introduction to Business") and units (example "4").

**MAKE SURE THERE ARE NO DAY OR TIME  
CONFLICTS - YOUR CLASSES MAY NOT OVERLAP.**

*Courses, dates & times are listed in the box to your right.*

3. Total your units.
4. Student Health Fee for emergency accident insurance (all must pay - line 1): \$3.00
5. Student Representation Fee (all must pay -line 2): \$1.00
6. Enrollment Fee: ALL students, EXCEPT Nevada Residents, must pay the enrollment fee as follows: Multiply **\$7.00** x total units and enter that amount on line 3.
7. NEVADA RESIDENTS, must pay the *Good Neighbor Policy Fee* as follows: Multiply **\$28.00** x total units and enter that amount on line 4.
8. All non-resident, out-of-state tuition must be paid as follows: Multiply **\$96.00** x total units and enter that amount on line 5.\*\*
9. **Total Cost:** Add together all health, student representation fee, enrollment fees, Good Neighbor Fees and/or out-of-state tuition fees and enter that total amount on line 6. **Include a check or money order** for this amount made payable to LTCC (Lake Tahoe Community College). **DO NOT SEND CASH.** Students may pay by VISA, MasterCard, or Discover Card. The card number and expiration date must be on the Registration Form in the appropriate space.
10. **MAIL** your completed registration form as directed on page three of this form. **THE LONDON REGISTRATION FORM MUST BE RECEIVED BY FRIDAY, SEPTEMBER 13TH, 2002.**

**11. NOTE:** All pages of this form must be filled in completely. Your registration will not be processed if you have overlooked any detail or failed to include all required fees. The deadlines for making changes to your class schedule must adhere to those posted in the LTCC Fall 2002 Schedule.

**Lake Tahoe Community College  
London Courses**

**BSN 100-3 Introduction to Business**

Instructor: Eric Sturgess  
Days: Mon-Wed  
Time: 9:00-10:50 am  
Units: 4

**BSN 215-1 International Business**

Instructor: Eric Sturgess  
Days: Tues-Thur  
Time: 3:15-4:55 pm  
Units: 4

**ECO 101-2 Principles of Economics**

Instructor: Eric Sturgess  
Days: Mon-Wed  
Time: 1:30-3:10 pm  
Units: 4

**\* HUM 131D-1 Special Topic: British Life & Culture**

Instructor: Eric Sturgess  
Days: Tues-Thur  
Time: 5:00-6:00pm  
Units: 2

\* Mandatory for LTCC students. You must enroll in this course.

**\*\*Note:** For information about the California Nonresident Tuition Exemption for eligible California High School graduates (AB 540), contact your home campus International Education Coordinator.

**LAKE TAHOE COMMUNITY COLLEGE  
LONDON FALL 2002 REGISTRATION FORM – PAGE ONE**

<b>1</b> SOCIAL SECURITY NUMBER	<b>2</b> Sex [ ] (M) Male [ ] (F) Female	<b>3</b> Check Current Quarter [ ] Summer [ ] Fall [ ] Winter [ ] Summer	<b>4</b> Enter Year 20_____
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<b>5</b> Name: (Last, First, Middle Initial) Last Name _____ First Name _____ Middle Initial _____	<b>6</b> Other Last Names Used At LTCC _____
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<b>7</b> Residence Address (Legal) Permanent Address. DO NOT USE P.O. BOX NUMBER Number & Street _____ City _____ State _____ Zip _____	<b>8</b> Telephone Number (____) _____ Area Code Number
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<b>9</b> Local Mailing Address (P.O. Box Number, City, State, Zip Code) P.O. Box Number _____ City _____ State _____ Zip _____	<b>10</b> Date of Birth ____/____/____ Month Day Year	<b>11</b> Age _____
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<b>12</b> Have you resided in California for the past 24 months? [ ] Yes [ ] No	<b>13</b> When did your California residency begin? ____/____/____ Month Day Year	<b>14</b> HAVE YOU EVER... YES NO If yes, when? Registered to vote in a state other than California? [ ] [ ] _____ Petitioned for divorce in a state other than California? [ ] [ ] _____ Attended an out-of-state institution as a resident of that state? [ ] [ ] _____ Declared non-residence for California State Income Tax purposes? [ ] [ ] _____
<p><b>NOTICE TO STUDENTS:</b></p> <p>1) If additional information is needed to determine your residence status, you will be required to present evidence of physical presence and intent to establish California residency. THE BURDEN OF PROOF IS UPON THE STUDENT (Ed. Code. Sec. 68040 et. seq.)</p> <p>2) Community Colleges are required to provide student information (ie: GPA's) to the Chancellor's Office using social security numbers. Students may choose not to give their social security number.</p>		

<b>15</b> Ethnic Background (Check one) [ ] (A) Asian [ ] (B) Black Non-Hispanic [ ] (F) Filipino [ ] (H) Hispanic [ ] (N) American Indian/Alaskan Native [ ] (O) Other Non-White [ ] (P) Pacific Islander [ ] (W) White Non-Hispanic [ ] (X) Unknown [ ] (XD) Decline to state	<b>16</b> Citizenship (Check only one) [ ] (1) U.S. Citizen <b>Non-U.S. Citizen Status</b> [ ] (2) Permanent Resident (Immigrant) Visa [ ] (3) Temporary Resident/Amnesty [ ] (4) Refugee/Asylee [ ] (5) Student Visa (with F-1 or M-1 Visa) [ ] (6) Other Visa [ ] (X) Status Unknown	<b>17</b> Employment Expectation Check the number of hours per week you expect to work during this academic term. Include paid employment only. [ ] (N) None [ ] (A) 1-9 [ ] (B) 10-19 [ ] (C) 20-29 [ ] (D) 30-39 [ ] (E) 40 or more
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**ENROLL ME IN THE FOLLOWING UNITS:**

Course	Title	Units	OFFICIAL USE ONLY			
			Add	Drop	Pay	Refund

**DETERMINATION OF FEES**

- |   |                |
|---|----------------|
| 1. Student Health Fee (ALL STUDENTS MUST PAY)   | \$ <u>3.00</u> |
| 2. Student Representation Fee (ALL STUDENTS MUST PAY)   | \$ <u>1.00</u> |
| 3. Enrollment Fees (ALL STUDENTS EXCEPT NEVADA RESIDENTS MUST PAY) Multiply <b>\$7.00</b> x Total Units | \$ _____       |
| 4. NEVADA RESIDENTS Multiply <b>\$28.00</b> x Total Units   | \$ _____       |
| 5. All non-resident, out-of-state tuition (EXCEPT NEVADA) Multiply <b>\$96.00</b> x Total Units         | \$ _____       |
| 6. <b>TOTAL OF ALL OF THE ABOVE FEES:</b>   | \$ _____       |

**METHOD OF PAYMENT - DO NOT SEND CASH**

- \_\_\_\_\_ Check or Money Order enclosed (payable to LTCC). Must have registering student's Social Security Number on it.
- \_\_\_\_\_ VISA
- \_\_\_\_\_ Mastercard
- \_\_\_\_\_ Card Number
- \_\_\_\_\_ Expiration Date
- \_\_\_\_\_ Signature

**LAKE TAHOE COMMUNITY COLLEGE  
LONDON FALL 2002 REGISTRATION FORM – PAGE TWO**

**18** Write name and location of last **HIGH SCHOOL** attended (Name, City, County, State)

High School Name _____	City _____	County _____	State _____
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**19** Write name and location of last **COLLEGE** attended (Name & State)

College Name _____	State _____
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**20** Student Education Status - Please indicate your education status at the beginning of the quarter for which you are applying. Mark the highest level of education attained.

<p><b>NOT A HIGH SCHOOL GRADUATE</b></p> <p><input type="checkbox"/> (0) Not a graduate of, and no longer enrolled in high school.</p> <p><input type="checkbox"/> (1) Special Admit student currently enrolled in high school.</p> <p><input type="checkbox"/> (2) Currently enrolled in Adult School.</p> <p><b>HIGH SCHOOL GRADUATE WITHOUT A COLLEGE DEGREE</b></p> <p><input type="checkbox"/> (3) Received High School diploma.</p> <p><input type="checkbox"/> (4) Passed the GED, or received a High School Certificate of Equivalency/Completion.</p> <p><input type="checkbox"/> (5) Received a Certificate of California High School Proficiency.</p> <p><input type="checkbox"/> (6) Received Foreign Secondary School Diploma/Certificate of Graduation.</p>	<p><b>COLLEGE DEGREE</b></p> <p><input type="checkbox"/> (7) Received an Associate Degree.</p> <p><input type="checkbox"/> (8) Received a Bachelor Degree or higher.</p> <p><b>TOTAL COLLEGE UNITS COMPLETED</b> _____</p> <p>Enter the year of the highest level of education attained or the year you last attended high school. 19_____</p>
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**21** Enrollment Status - (Check only one) **TOTAL COLLEGE UNITS COMPLETED** \_\_\_\_\_

<p><input type="checkbox"/> (1) <b>NEW</b> - Attending college for the first time after High School exclusive of Summer Quarter.</p> <p><input type="checkbox"/> (2) <b>TRANSFER</b> - Attended another college, and have not attended LTCC previously.</p> <p><input type="checkbox"/> (3) <b>RETURNING TRANSFER</b> - Attended LTCC, transferred to another college, and now returning to LTCC.</p> <p><input type="checkbox"/> (4) <b>RETURNING</b> - Attended LTCC, did not attend any college for one or more regular sessions and now back at LTCC.</p> <p><input type="checkbox"/> (5) <b>CONTINUING</b> - Attended the previous regular session at LTCC.</p> <p><input type="checkbox"/> (Y) <b>SPECIAL ADMISSION</b> - A student currently enrolled in Elementary School or High School.</p>	
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**22** Educational Goal (Select your highest priority and mark only one)

<p><input type="checkbox"/> (A) Transfer to 4-year college with A.A. degree</p> <p><input type="checkbox"/> (B) Transfer to 4-year college without A.A. degree</p> <p><input type="checkbox"/> (C) Obtain a community college academic degree</p> <p><input type="checkbox"/> (D) Obtain a community college vocational degree</p> <p><input type="checkbox"/> (E) Earn a vocational certificate without transfer</p> <p><input type="checkbox"/> (F) Discover/formulate career interests, plans, goals</p> <p><input type="checkbox"/> (G) Prepare for a new career (acquire job skills)</p> <p><input type="checkbox"/> (H) Advance in current job/career (update job skills)</p>	<p><input type="checkbox"/> (I) Maintain certificate or license (e.g., Nursing, Real Estate)</p> <p><input type="checkbox"/> (J) Educational development (intellectual, cultural, physical)</p> <p><input type="checkbox"/> (K) Improve basic skills in English, reading or math</p> <p><input type="checkbox"/> (L) Complete credits for high school diploma or GED</p> <p><input type="checkbox"/> (M) Undecided on goal</p>
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**23** Disability Status (check only one) **24** College Major (check only one)

<p><input type="checkbox"/> ( ) No Disabilities</p> <p><input type="checkbox"/> (M) Mobility or Orthopedic - Serious limitation in locomotion or motor functions</p> <p><input type="checkbox"/> (V) Visually Impaired - Blindness or partially blind</p> <p><input type="checkbox"/> (O) Other Physical Disability - Serious dysfunction of a body part</p> <p><input type="checkbox"/> (H) Hearing Impaired</p> <p><input type="checkbox"/> (S) Speech/Language Impaired</p> <p><input type="checkbox"/> (D) Developmentally Delayed Learner</p> <p><input type="checkbox"/> (B) Acquired Brain Injury</p> <p><input type="checkbox"/> (L) Learning Disabled</p> <p><input type="checkbox"/> (W) Multiple Disabilities</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"><input type="checkbox"/> 0000 Unknown</td> <td style="width: 33%;"><input type="checkbox"/> 1001 Fine Arts</td> </tr> <tr> <td><input type="checkbox"/> 2105 Admin. of Justice</td> <td><input type="checkbox"/> 2133 Fire Science</td> </tr> <tr> <td><input type="checkbox"/> 1002 Art</td> <td><input type="checkbox"/> 4930 General Studies</td> </tr> <tr> <td><input type="checkbox"/> 0502 Business - Accounting</td> <td><input type="checkbox"/> 0835 Health &amp; Physical Education</td> </tr> <tr> <td><input type="checkbox"/> 0504 Business - Finance</td> <td><input type="checkbox"/> 4903 Humanities</td> </tr> <tr> <td><input type="checkbox"/> 0501 Business - General</td> <td><input type="checkbox"/> 506.2 Hotel &amp; Restaurant Management</td> </tr> <tr> <td><input type="checkbox"/> 0506 Business - Management</td> <td><input type="checkbox"/> 1401.1 Legal Assistant</td> </tr> <tr> <td><input type="checkbox"/> 0509 Business - Marketing</td> <td><input type="checkbox"/> 0401 Natural Science &amp; Math</td> </tr> <tr> <td><input type="checkbox"/> 0514 Business - Office Administration</td> <td><input type="checkbox"/> 1011 Photography</td> </tr> <tr> <td><input type="checkbox"/> 506.1 Business - Small</td> <td><input type="checkbox"/> 0511 Real Estate</td> </tr> <tr> <td><input type="checkbox"/> 0701 Computer Science</td> <td><input type="checkbox"/> 2201 Social Science</td> </tr> <tr> <td><input type="checkbox"/> 2701 Early Childhood Ed.</td> <td><input type="checkbox"/> Other _____</td> </tr> </table>	<input type="checkbox"/> 0000 Unknown	<input type="checkbox"/> 1001 Fine Arts	<input type="checkbox"/> 2105 Admin. of Justice	<input type="checkbox"/> 2133 Fire Science	<input type="checkbox"/> 1002 Art	<input type="checkbox"/> 4930 General Studies	<input type="checkbox"/> 0502 Business - Accounting	<input type="checkbox"/> 0835 Health & Physical Education	<input type="checkbox"/> 0504 Business - Finance	<input type="checkbox"/> 4903 Humanities	<input type="checkbox"/> 0501 Business - General	<input type="checkbox"/> 506.2 Hotel & Restaurant Management	<input type="checkbox"/> 0506 Business - Management	<input type="checkbox"/> 1401.1 Legal Assistant	<input type="checkbox"/> 0509 Business - Marketing	<input type="checkbox"/> 0401 Natural Science & Math	<input type="checkbox"/> 0514 Business - Office Administration	<input type="checkbox"/> 1011 Photography	<input type="checkbox"/> 506.1 Business - Small	<input type="checkbox"/> 0511 Real Estate	<input type="checkbox"/> 0701 Computer Science	<input type="checkbox"/> 2201 Social Science	<input type="checkbox"/> 2701 Early Childhood Ed.	<input type="checkbox"/> Other _____
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<input type="checkbox"/> 2701 Early Childhood Ed.	<input type="checkbox"/> Other _____																								

**25** Primary Language **26** I certify under penalty of perjury that the information on this application is correct and I understand that falsification or failure to report change in residence may result in my dismissal.

<p><input type="checkbox"/> (E) English</p> <p><input type="checkbox"/> (N) Not English</p>	<p>Student Signature: _____ Date: _____</p>
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**If you are under 19 years of age, proceed to Page Three.**

**LAKE TAHOE COMMUNITY COLLEGE  
LONDON FALL 2002 REGISTRATION FORM – PAGE THREE  
TO BE COMPLETED BY ALL APPLICANTS UNDER 19 YEARS OF AGE**

**27** Print the names of your father and mother if living or your legal guardian:

Father (if living) \_\_\_\_\_  
 Mother (if living) \_\_\_\_\_  
 Legal Guardian \_\_\_\_\_

**28** Print the residence address of your father and mother and/or guardian (Number, Street, City, State, Zip)

Father (if living)	_____	_____	_____	_____	_____
	Number	Street	City	State	Zip
Mother (if living)	_____	_____	_____	_____	_____
	Number	Street	City	State	Zip
Legal Guardian	_____	_____	_____	_____	_____
	Number	Street	City	State	Zip

<b>29</b> Parents' Residency	<b>30</b> HAVE YOUR PARENTS OR GUARDIAN:	YES	NO	If yes, when?
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When did your parents'/guardians' California residency begin?  
 \_\_\_\_\_  
 Month / Day / Year

Registered to vote in a state other than California?	[ ]	[ ]	_____
Petitioned for divorce in a state other than California?	[ ]	[ ]	_____
Attended an out-of-state institution as a resident of that state?	[ ]	[ ]	_____
Declared non-residence for California State Income Tax purposes?	[ ]	[ ]	_____

**31**  
 Have you lived continuously with any adult California resident other than parent or legal guardian during the past two years? Yes [ ] No [ ]  
 If Yes, give name and address: \_\_\_\_\_

**25** Student Signature

I certify under penalty of perjury that the information on this application is correct and I understand that falsification or failure to report change in residence may result in my dismissal.

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

**Foothill/DeAnza College Students, please return this form to:**

**Art Turmelle  
 Campus Abroad Program  
 Foothill Community College  
 12345 El Monte Road  
 Los Altos Hills, CA 94022**

**Lake Tahoe Community College Students, please return this form to:**

**Lake Tahoe Community College  
 Admissions & Records  
 One College Drive  
 South Lake Tahoe, CA 96150-4524**