





# CREDIT REGISTRATION

## Northampton Community College

3835 Green Pond Road, Bethlehem, PA 18020-7599

Fax: 610-861-5551

Student ID# \_\_\_\_\_ Social Security #      Semester \_\_\_\_\_ Year \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
Last First M. I. prior name

Address \_\_\_\_\_ Primary Phone # (\_\_\_\_) \_\_\_\_\_  
Street City State Zip

Major \_\_\_\_\_ Last Semester Attended \_\_\_\_\_ Alternate Phone # (\_\_\_\_) \_\_\_\_\_

### STUDENT CLASS SCHEDULE (to be completed by student)

Course Number	Section Number	Course Title	Meeting Days and Times					Check if Auditing *	Number of Credits
			M	T	W	R	F		
<b>Total Credits</b>									

\* If you are auditing a course (no grade to be assigned), place a checkmark in the "Check if Auditing" column. You may add a course with an audit status during the first week of class only.

- ◆ See college catalog or website for refund and withdrawal information.
- ◆ Students who wish to withdraw from either a course or the College must receive official authorization from the Records Office. Failure to withdraw officially may result in the recording of an F grade. A student who is asked to leave the College for misconduct or delinquent attendance will receive no refund of tuition or fees.

In consideration of this registration and enrollment in Northampton Community College, I, the undersigned student (or parent/guardian of minor child), do hereby agree to assume and pay any and all costs and charges including collection costs and attorney fees for delinquent accounts.

Student Signature \_\_\_\_\_ Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_ Records Initials \_\_\_\_\_

required for full time student