

# MASSASOIT COMMUNITY COLLEGE

## Office of Early College Access

**Brockton Campus**  
One Massasoit Boulevard  
Brockton, MA 02302

**Canton Campus**  
900 Randolph Street  
Canton, MA 02021

**Middleborough Center**  
49 Union Street  
Middleborough, MA 02346

[www.massasoit.edu](http://www.massasoit.edu)  
[earlycollege@massasoit.mass.edu](mailto:earlycollege@massasoit.mass.edu)

## EARLY COLLEGE REGISTRATION FORM

Fall \_\_\_\_\_ (year)    Spring \_\_\_\_\_ (year)    Summer \_\_\_\_\_ (year)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email address \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_ High school student is currently attending \_\_\_\_\_

SASID \_\_\_\_\_ Have you attended Massasoit Community College before?  Yes  No If yes, when? \_\_\_\_\_

Gender  Male  Female

Do you consider yourself to be Hispanic/Latino?  Yes  No

Please check if you are a dependent of:

Veteran  Active member of Armed Forces

Please select one or more of the following that best describes you:

- American Indian/Alaska Native    Asian  
 Black/African American    Cape Verdean  
 Haitian    Native Hawaiian/Pacific Islander  
 White/Caucasian

Please be advised that ceasing to attend a class DOES NOT constitute a withdrawal. If the proper withdrawal form is not completed, a grade of F (failure) will be recorded.

CRN	COURSE/SECTION	COURSE TITLE	CREDITS

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

### To be completed by Early College Access Staff

School/District \_\_\_\_\_

Early College Program  CDEP  MDEP  Gateway  Home School  Youth Learner  Contract Course  Grant \_\_\_\_\_  Other \_\_\_\_\_