Non-Credit STUDENT ENROLLMENT & INFORMATION SHEET



Physical Address Email: Mailing Address(if different) Date: Phone (Best) Phone (Home) STUDENT INFORMATION Created Student File Indicate Course/Training Attending here: Watershed Restsoration Training Summer Recovery Crew Training Summer Recovery Crew Training (Qualifying Realtor Training CEYO/EVDT (EmergencyVehicleDriverTraining) Home Inspection Training Date Completed Notes: Application for Enrollment (on-line) N/A Registration Card /Online Enrollment N/A				
Email:	NAME:	SS#:	•	LCC ID#
Date: Phone (Best) Phone (Home) STUDENT INFORMATION Created Student File DOB: Indicate Course/Training Attending here: Watershed Restsoration Training Summer Recovery Crew Training Summer Recovery Crew Training (EVO/EVDT (EmergencyVehicleDriverTraining)) Home Inspection Training CEVO/EVDT (EmergencyVehicleDriverTraining) Date Completed Notes: Application for Enrollment (on-line) Registration Card /Online Enrollment N/A Application for Financial Assistance: Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:	Physical Address	Email:	Email:	
STUDENT INFORMATION Created Student File Indicate Course/Training Attending here: Watershed Restsoration Training Summer Recovery Crew Training (EYO/EVDT (EmergencyVehicleDriverTraining)) Date Completed Application for Enrollment (on-line) Registration Card /Online Enrollment N/A Application for Financial Assistance: Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:	Mailing Address(if different)	@	State	Zip
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Indicate Course/Training Attending here: Watershed Restsoration Training Realtor pre-Licensing Drone Flight Training Summer Recovery Crew Training Qualifying Realtor Training Other: CEVO/EVDT (EmergencyVehicleDriverTraining) Home Inspection Training Application for Enrollment (on-line) N/A Registration Card /Online Enrollment N/A Application for Financial Assistance: N/G Bc Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:	STUDENT INFORMATION			
Watershed Restsoration Training Summer Recovery Crew Training CEVO/EVDT (EmergencyVehicleDriverTraining) Date Completed Application for Enrollment (on-line) Registration Card /Online Enrollment Application for Financial Assistance: Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:	Created Student File	OOB:		
Summer Recovery Crew Training Qualifying Realtor Training Other: CEVO/EVDT (EmergencyVehicleDriverTraining) Date Completed Notes: Application for Enrollment (on-line) Registration Card /Online Enrollment Application for Financial Assistance: Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:	Indicate Course/Training Attending here:			
CEVO/EVDT (EmergencyVehicleDriverTraining) Date Completed Application for Enrollment (on-line) Registration Card /Online Enrollment Application for Financial Assistance: Source of Funding: Funding CONTACT NAME: Home Inspection Training N/G N/A N/A Place N/G BC Self Pay - WIOA - HELPNM - DVR - Employer - Grant			Drone Flight T	raining
Date Completed Notes: Application for Enrollment (on-line) Registration Card /Online Enrollment Application for Financial Assistance: Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:			Other:	
Application for Enrollment (on-line) Registration Card /Online Enrollment Application for Financial Assistance: Source of Funding: Funding CONTACT NAME: N/A N/A Bc Self Pay - WIOA - HELPNM - DVR - Employer - Grant	CEVO/EVDT (EmergencyVehicleDriverTraining)	Home Inspection Training		
Registration Card /Online Enrollment N/A Application for Financial Assistance: M/g Bc Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:		Date Completed Notes:		
Application for Financial Assistance: N/Yg Bc Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:	Application for Enrollment (on-line)	N/A		
Source of Funding: Self Pay - WIOA - HELPNM - DVR - Employer - Grant Funding CONTACT NAME:	Registration Card /Online Enrollment	N/A		
Funding CONTACT NAME:	Application for Financial Assistance:	Bc		
	Source of Funding:	Self Pay - WIOA	HELPNM - DVR -	Employer - Grant
Contact Phone & Email:	Funding CONTACT NAME:			
	Contact Phone & Email:			