

Tohono O'odham Community College Office: (520)479-2305 | admissions@tocc.edu | Fax: (520)383-8403



Registration Transaction Form

Student ID Number:			Birthdate: / / Student Email:							
Last Name:						Middle Name:				
Mailing Address:			(City:		_ State:	Zip:	
Cell Phone Number:				Landline Phone Num						
Has any o	f the above	e informat	ion chang	ed?	If so,	please subn	nit a <i>Change of S</i>	tudent Infor	mation Form.	
Year you p	olan to enro	11 :		_ Term : Fall Spring S			ring Summ	ner		
Course Prefix	Course Number Course Section Credit Hours Audit (√ if yes)		Cla	ss Day(s)	Class Time	Instr	uctor's Signature			
☐ Drop/	Withdra Course	W Course	Credit				Required Signatu		rudddenn dandling to unitue	
Prefix	Number	Section	Hours	Insti	ructor S	Signature		istructor's signature required after add/drop deadline, to waive rerequisites, or for instructor initiated withdrawals.		
							78 1793 49 53	19 11 15 E	required to recommend course placements.	
							faculty withdrawal limits. There is a 9	Dean of Academics' signature required after add/drop deadline, for faculty withdrawals or to add courses that exceed maximum credit limits. There is a 9 credit limit for summer session and a 18 credit		
							Dean of Student S	limit for the Fall and Spring semester. Dean of Student Services' signature required after add/drop deadline or to enroll students under use 16.		
Student's Signature: Date:						Advisor/Faculty Advisor's Signature: Date:				
Dean of Academic's Signature Date:						Dean of Student Services' Signature Date:				
STAFF USE Credit hour	ONLY: s before tran	saction		Regist	tration :	Site				
	s after transa	<u></u>		10000		/-				
Cicuit nour	s arrer trailsa			TOCO	Regis	tration Offici	al	Date	e	

Tohono O'odham Community College is an equal opportunity, affirmative action employer and educational institution committed to excellence through diversity. Reasonable accommodations, including materials in an alternative format, will be made for individuals with disabilities when a minimum of five working days advance notice is given. Contact the Counseling Office at (520) 479-2300 ext. 1210 or email: aespinoza@tocc.edu