

# JOIN THE PRIDE

## ENROLLMENT WORKSHEET



STUDENT NAME: \_\_\_\_\_

STUDENT CWID: \_\_\_\_\_

### Student Type:

- New Student     Continuing Student

TR FR INTL ELI VA ATHL

### College for Advising:

UC    COB    CHSSA    CSE    COEHS

### Zone 1:

Staff Initials \_\_\_\_\_

- Apply for Admission/Re-Admission \_\_\_\_\_
- Submit Transcripts \_\_\_\_\_
- Submit Proof of Meningitis \_\_\_\_\_
- Student Health Center \_\_\_\_\_
- Orientation Agreement Form \_\_\_\_\_

Please Note: Students must submit transcripts from all institutions attended. Proof of bacterial meningitis is required for all students under the age of 22 not enrolled in an online-only program.

### Zone 2:

Staff Initials \_\_\_\_\_

- T.S.I. Status/Testing Referral \_\_\_\_\_
- T.S.I. Assessment Results \_\_\_\_\_

### Zone 3:

Staff Initials \_\_\_\_\_

- Financial Agreement \_\_\_\_\_
- Academic Advising \_\_\_\_\_
- Online Registration \_\_\_\_\_
- Financial Aid Application/Award \_\_\_\_\_
- Payment Plans/Emergency Tuition Loan \_\_\_\_\_

### While You're Here, Don't Forget:

Staff Initials \_\_\_\_\_

- Student ID Card \_\_\_\_\_
- Visit the Bookstore \_\_\_\_\_
- Purchase a Parking Permit \_\_\_\_\_
- Get info on FREE tutoring \_\_\_\_\_
- Housing Application and/or Meal Plan \_\_\_\_\_
- Hispanic Outreach \_\_\_\_\_
- Veterans Affairs \_\_\_\_\_

### NOTES:

Issued By: \_\_\_\_\_

Date: \_\_\_\_\_