



Military Contract Education Course Registration Form

(for military students unable to register using online services at the MyCCC portal)

1. This form may only be utilized by students who were unable to register using the MyCCC portal, AND the following conditions exist:

____ I was unable to register online at MyCCC. Briefly describe the problem: _____

AND

____ I have included my Tuition Assistance Authorization for the course(s) listed or have provided payment information below.

AND

____ I am a NEW STUDENT at COASTLINE and have submitted a CCCApply Online Application. My Student ID is _____

OR

____ I am a CONTINUING STUDENT at COASTLINE. My Student ID is _____

2. LEGAL NAME _____ 3. _____
Last First M.I. Prior Names Used

4. BIRTHDATE: _____ (Month/Day/Year) 5. MALE FEMALE

6. EMAIL ADDRESS _____

7. PHONE: (____) _____ (____) _____
Area Code Day Phone Area Code Evening Phone

8. MILITARY STATUS: Active Duty Reservist Veteran Spouse (SMD) Parent (FMD) Civil Service (DoD)

(If Military complete items 8A- 8E)

8a. Branch of Service: Navy Marine Air force Coast Guard National Guard Army

8b. Rank _____ (E-6, W-2, 0-3, etc.) 8d. Current Military Installation: _____

8c. Rate or MOS _____ (HM, 6134, 92A, etc.) 8e. Years of Service Completed (not counting breaks in service) _____

9. Course Selection and Determination of Fees. Tuition is \$200 per credit/semester hour (SH) for the Online Program.

9a. SEMESTER FOR WHICH YOU ARE REGISTERING: Summer Fall Spring Month/Year Class Session Begins: _____

9b. List the courses. The maximum is 9SH per session.	Semester Hours
Total Number of Semester Hours	
Total Tuition =Total Semester Hours x Tuition Rate (\$ 200 for online)	

9c. METHOD OF PAYMENT: Tuition Assistance (*TA Authorization must accompany registration form*) G.I. Bill : Chapter _____

Credit Card: VISA MasterCard Discover (If credit card, provide the information below and sign)

Credit Card No _____ Exp. Date: _____
 Billing Zip Code _____ CVV: _____

Authorizing Signature _____ Date _____

10. THIS APPLICATION IS CONSIDERED A LEGAL DOCUMENT AND WILL BECOME A PERMANENT PART OF YOUR RECORD. FALSIFICATION OF THIS DOCUMENT MAY BE CAUSE FOR DISMISSAL AND OTHER LEGAL ACTION AS DEEMED APPROPRIATE. I CERTIFY THAT ALL INFORMATION PROVIDED IS CORRECT AND THAT I AM IN COMPLIANCE.

I HEREBY AUTHORIZE THE RELEASE OF MY EDUCATIONAL RECORDS TO THE UNITED STATES DEPARTMENT OF DEFENSE OR COASTLINE DESIGNEE UNDER THE PROVISIONS OF THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974 FOR THE PERIOD OF TIME WHILE I AM PARTICIPATING IN THE MILITARY EDUCATION PROGRAMS AT COASTLINE COMMUNITY COLLEGE. THOSE ORGANIZATIONS AND AGENCIES TO WHICH YOUR INFORMATION MAY BE GIVEN ARE PROHIBITED BY LAW FROM USING IT FOR ANY UNAUTHORIZED PURPOSE OR FROM SUBSEQUENTLY RELEASING IT TO ANYONE ELSE.

SIGNATURE _____ Date _____

Remember to sign this form and FAX **with** tuition assistance authorization or credit card payment to (714)241-6270

- OR -

Scan and email to milreg@coastline.edu