



# Cayuga Advantage Registration Form

FALL SEMESTER OR ALL-YEAR

Office Use Only

**INSTRUCTIONS STUDENT:** Please fill out neatly and return to your instructor.  
**INSTRUCTOR:** Please be sure **all** information is clearly printed. Alphabetize forms, **attach a class roster** and return promptly to the Cayuga Advantage program office.

Today's Date -- Social Security Number --

**Student Name** (the name on your Social Security card)  
 Last  First  MI   
 Date of Birth -- Daytime Phone --  
 Gender:  Female  Male High School   
 E-Mail Address   
 Are you a U.S. citizen?  Yes  No Are you a foreign exchange student?  Yes  No  
 If No, Country of Birth  Country of Citizenship  Visa Type   
 Race/Ethnicity: Are you Hispanic/Latino?  Yes  No  
 If **YES**, check one  Central American  Dominican  Mexican  Puerto Rican  South American  Other Hispanic/Latino  Cuban  
 If **NO**, check one  Am. Indian/Alaskan Native  Asian  Black/African-American  Native Hawaiian /Other Pacific Islander  White

**Current Mailing Address** (Must be a valid street address; no P.O. Boxes)  
*If you have **NOT** been a resident of Cayuga County for the past 6 months **OR** have not resided at a current Cayuga County address for the past 12 months, you **MUST** complete a **Certificate of Residence** application, sign it in the presence of a Notary Public and return it to your instructor immediately. Please check with your County Treasurer's office for the appropriate procedure.*  
 Number and Street  Apt. #   
 City  State  Zip Code  County   
 How long have you resided at this address?  Years  Months

**Previous Address** (Complete this section if you have lived at your current address for less than 12 months.)  
 Number and Street  Apt. #   
 City  State  Zip Code  County

**Course Requests**

Dept	Course #	Course Title	Teacher	Fall	All Year
EXAMPLE Hist	101	Write the course name below		✓	

**Student Signature:** \_\_\_\_\_  
 This signature also indicates my willingness to participate in surveys related to my Cayuga Advantage course work.

**Parent/Guardian Signature:** \_\_\_\_\_  
 (Required for students under age 16, after 12/1 of current year.)