

Name (Last  First  Middle Initial) 

**CHECK ONE:**

1. Do you consider yourself to be Hispanic/Latino?  
 Yes  No

2. In addition, please select one or more of the following racial categories to describe yourself:

American Indian or Alaskan Native  
 Asian  
 Black or African American  
 Native Hawaiian or Pacific Islander  
 White

Mailing Address  City  State

Zip  Student ID # or SS#  Date of Birth  Sex:  Home Phone

Business/Cell Phone  E-Mail Address

This is to certify that  I AM  AM NOT a legal resident of the College of the Mainland District. To be a legal resident of College of the Mainland District, you must reside in one of the following school districts: Hitchcock, Santa Fe, (including Algoa, Arcadia, Alta Loma), Texas City, La Marque and Dickinson.

 Signature \_\_\_\_\_ Date \_\_\_\_\_

	Course #	Course Name	Instructor	Date	Cost	CEQ
<input type="checkbox"/>	SAFE-5025-OSHT-1071-109CL	Fire Safety In The Workplace	E. Johnson	5/12/17	No-Cost	317
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	Revised 11.2014		Print Form	Reset Form		