



For Office Use Only
Student ID #: _____

HIGH SCHOOL REGISTRATION FORM

CONCURRENT ENROLLMENT through INFINITY Online Program

Please Print			
Name _____			
Last	First	MI	
Address _____			
City _____	State _____	Zip Code _____	
Home Phone (____) _____	Birth Date _____		
Sex: F___ M___	Social Security Number _____		
Resident of Minnesota? Yes___ No___	County _____		
Have you ever taken a credit class at LSC? Yes___ No___ Graduation Date (month/year) _____			

Date of Birth ____/____/____	
1. ___ Non-resident Alien	4. ___ Asian or Pacific Islander
2. ___ Black, Non-Hispanic	5. ___ Hispanic
3. ___ American Indian or Alaskan Native	6. ___ White, Non-Hispanic

Course Registration Information			
Course Number	Course Title	Semester / Fall or Spring	Number of Credits
MATH 1150	Pre Calculus	Spring 2009	5
Total Credits			5

High School: *INFINITY Online, PO Box 520, Coleraine, Minnesota 55722*

*Student's Signature

Date

*HS Teacher Signature

*I give permission for grades to be shared between the high school and Lake Superior College.

*Student meets course eligibility requirements.