LUZERNE COUNTY COMMUNITY COLLEGE REGISTRATION FORM

521 Trailblazer Drive, Nanticoke, PA 18634

LCCC F-94A Revised 12/2023

LUZERNE STUDENT I.D.:					erm: 🗖	Fall	Yea	r: 20		
						Spring				
STUDENT NAME:							, ,	5,8 or 11	·	
ADDRESS:					☐ Summer II (4 or 6 weeks) ☐ Winter Intersession					
ADDRESS:	()									
DATE:PHONE NUMBER: (PROGRAM:										
STUDENT INITIALS Lacknowledge financial responsibility for	the selected course(s) if they are not cancelled by the College of	or if I do not submit a v	vithdraw for	n prior to t	he start of th	e semester.	even if I do	not attend my	class(es).	
	y declared major will not be financial aid eligible.			- Prior to t					C1	
Tucknowledge that course(s) outside of in	COURSE SEI	ECTIONS								
Corres No. 8 Co. 4 co.						es		Campus Location	Doom	
Course No. & Section	Course Title	Credit	s Mon.	Tues.	Wed.	Thur.	Fri.	Location	Room	
E N G - 1 O 1 - H A 5	English Composition I	3	8-8:55		8~8:55		8-8:55	HAZ.	111	
	+									
*NO ALTERNATE COURSES MAY BE SELEC	TED IN PLACE OF DEVELOPMENTAL COURSES.	Total Credits			•	•	•	•		
Student Signature	Counselor/Advisor Signature			Ca	_ Campus/Location					
Counselor/Advisor's Comments:										