



88 S Tooele Blvd.  
 Tooele, UT 84074  
 Phone: (435) 248-1800 Fax: (435) 248-1900  
 www.tatc.edu

# 2014 - 2015 Pre-registration

Seeking HS Credit (Credit is issued according to TCSD criteria)

Not seeking HS Credit

Name \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
Number and Street City State Zip

High School \_\_\_\_\_ Grade Level \_\_\_\_\_ Gender \_\_\_\_\_  
At time of course Male/Female

Phone (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

State Student ID # (SS ID#) \_\_\_\_\_ (Please note  this number is issued by the State, it has 8 digits and starts with a 1. It is not the student's SSN or High School ID #.)

Program:			Enrollment Period:						
_____			_____						
Length (hrs):			Start Date:						
A/B	Period	Time	Mon	Tue	Wed	Thu	Fri	Weekly Hours	
	3	8:00-9:00 AM							
	4	9:00-10:00 AM							
	5	10:00-11:00 AM							
	6	11:00-12:00 PM							
	7	12:00-1:00PM	Lunch						
	8	1:00-2:00 PM							
	9	2:00-3:00 PM							
	10	3:00-4:00 PM							
	11	4:00-5:00 PM							
	12	5:00-6:00 PM							
	13	6:00-7:00 PM							
	14	7:00-8:00 PM							
Total Hours Per Week									

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Counselor Signature (Career Counselor or Administrator) \_\_\_\_\_ Date \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

TATC is an Affirmative Action/Equal Opportunity Institution

