



# MAIL or FAX (for Continuing Students only)

New Students: contact Admissions Office at [admiss@mccc.edu](mailto:admiss@mccc.edu)

## Registration for Credit Courses

Mail or Fax this form to:

MCCC Registration, PO Box 17202, Trenton, NJ 08690 • Fax (609) 570-3861

### RESIDENCY CODES

#### Mercer County

- 22 City of Trenton
- 23 E. Windsor Twp.
- 24 Ewing Twp.
- 25 Hamilton Twp.
- 26 Hightstown Bor.
- 27 Hopewell Bor.
- 28 Hopewell Twp.
- 29 Lawrence Twp.
- 30 Pennington Bor.
- 31 Princeton Bor.
- 32 Princeton Twp.
- 33 Washington Twp.
- 34 W. Windsor Twp.

#### Other Counties

- 01 Atlantic
- 02 Bergen
- 03 Burlington
- 04 Camden
- 05 Cape May
- 06 Cumberland
- 07 Essex
- 08 Gloucester
- 09 Hudson
- 10 Hunterdon
- 41 Middlesex
- 42 Monmouth
- 43 Morris
- 44 Ocean
- 45 Passaic
- 46 Salem
- 47 Somerset
- 49 Union
- 50 Warren

Last Name

Student ID #

First Name

MI

Residency Code (see left sidebar)

Address

City

State

Zip

(Area Code) Primary Phone Number




(Area Code) Secondary Phone Number

E-mail Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_





MONTH DAY YEAR Sex M/F

Program Code: \_\_\_\_\_ ([CLICK HERE](#) to view options)

Course Number	Course Title	Credit/Charge Hours	Course Fee (if any) from course listing

<b>PAYMENT</b> —Full payment of tuition and fees and/or proof of financial aid or Payment Plan arrangements must accompany registration.  <b>Do not send cash.</b>  <input type="checkbox"/> Check or money order enclosed for \$ _____	<b>Total course fees</b>	\$
	<b>Total credit/hours taken</b>	\$
	<b>Tuition and college fee charges due from tuition table</b> ( <a href="#">CLICK HERE</a> to view)	\$
	<b>TOTAL DUE</b>	\$

Number

CVV2 Number (3-digit number on back of card; 4-digit number on front of American Express)

Cardholder name \_\_\_\_\_ Card expiration date \_\_\_\_\_

Amount to be charged \$ \_\_\_\_\_ Cardholder signature \_\_\_\_\_

**Residency**  
 Have you or your parent(s)/guardian(s) been a New Jersey resident for at least 12 months?  Yes  No  
 I have met the course prerequisites and understand that I am responsible for knowing important deadline dates.

Under the Family Educational Rights and Privacy Act of 1974, the college will release certain directory information about students unless specifically requested not to do so by the student.  
 \_\_\_\_\_ x \_\_\_\_\_  
 Date Signature