Basic Mountain Music
Bring your own instrument or rental instruments will be available at the
Heritage Shoppe in Woodlawn, VA
CLASS INFORMATION
Thursdays, September 17, 2015—November 19, 2015
6:00 p.m.—9:00 p.m.
WCC Crossroads
Room 172
1117 East Stuart Drive
Galax, Virginia
Cost: $65.00

Taught by Emily Spencer

To register please contact Brinda Browning
WCC/Workforce Development
1000 East Main Street
Wytheville, VA 24382
Phone: (276) 223-4712
Email: bbrowning@wcc.vccs.edu

WORKFORCE DEVELOPMENT
@ WYTHEVILLE COMMUNITY COLLEGE
1000 East Main Street
Wytheville, VA 24382
Phone: (276) 223-4712
Fax: (276) 223-4716
E-mail: wfd@wcc.vccs.edu

Wytheville Community College does not discriminate on the basis of race, sex, color, national origin, religion, sexual orientation, gender identity, age, political affiliation, genetics, veteran status, or disability when the person is otherwise qualified in its educational programs and activities or employment. The following person has been designated to handle inquiries regarding the non-discrimination policies: Crystal Cregger, Vice President of Finance and Administrative Services, 215 Bland Hall, 1000 East Main Street, Wytheville VA 24382, 276-223-4762. For further information, call 1-800-421-3481 for the address and phone number of the enforcement office that serves your area.
Non-Credit Application for Admission
Wytheville Community College – Office of Workforce Development
1000 East Main Street, Wytheville, VA 14382
Phone: 276-223-4763 Fax: 276-223-4716

Name
Prefix: (Mr., Mrs.) First Full Middle Last Suffix (Jr., Sr.)

Social Security Number: - - See privacy statement, which may be obtained in the Admissions/Records Office.

Former Name
First Full Middle Last
Date of Birth: _______ / _______ / _______ Have you received a GED since 6/30/09? Yes ☐ No ☐
(Month) (Day) (Year)

Have you previously attended, applied for admission to, or been employed by any Virginia Community College? Yes ☐ No ☐
If yes and you know your Student ID/EMPL ID, please provide: __________________________
What campus do you plan to attend (if known)? __________________________
Primary Phone (include area code): (____)_________ Ext. ______

Mailing Address
(Street Address) (City) (State) (Zip) (Country, if not USA)

Current residence: __________________________ (City/County) Provide what you consider to be your location of residence.
Have you lived in Virginia for the last 12 months? Yes ☐ No ☐ If no, where else did you live:
_____________________________ (US State or foreign country)

VISA Type __________________________ VISA Expiration Date __________________________

Email Address __________________________

Emergency Contact Information
First Name Last Name Relationship Phone

Employer Name & Address

Business Phone (____) - - Ext. ______ Employer E-mail address __________________________

Ethnicity ☐ American Indian/Alaskan Native ☐ Asian ☐ Black/African American ☐ Hispanic/Latino ☐ White ☐ Native Hawaiian/Other Pacific Island

Gender ☐ Male ☐ Female

☐ Alien temporary ☐ Not living in the U.S. ☐ Not indicated

Primary Language ☐ English ☐ Other

Military Status ☐ No Military Service ☐ Spouse ☐ Dependent ☐ Active Duty ☐ Active Reserves
☐ Inactive Reserves ☐ Retired ☐ Veteran/VA Ineligible ☐ Veteran ☐ Branch __________________________

Applicant’s Signature: __________________________ Date: __________________________

This institution promotes and maintains educational opportunities without regard to race, color, sex, ethnicity, religion, gender, age (except when age is a bona fide occupational qualification), handicap, national origin or other non-merit factors. For further information, contact the Title IX Coordinator in Smyth Hall – Room 110, (276) 223-4669.

Note: Employer, date of birth, sex, and race information are used for research, reporting, and management of student records.

CLASS REGISTRATION

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<th>Course Number</th>
<th>Section</th>
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