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## Mitchell Technical Institute

1800 East Spruce St. • Mitchell, South Dakota 57301 • (800) 684-1969 • www.mitchelltech.edu


# STUDENT COURSE SCHEDULE REQUEST
## Limited Enrollment – Non Degree Seeking

| Student I.D. # | Last Name | First | M.I | Program | Sem./Yr |
|---|---|---|---|---|---|
| | | | | **Limited Enrollment** | |

| Permanent Address | City | State | Zip | Phone Number |
|---|---|---|---|---|
| | | | | ( ) |

| Social Security Number | Birth Date | Email Address | Cell Phone Number |
|---|---|---|---|
| | | | ( ) |

Hispanic : Yes ____ No ____

Race(s): _____ American Indian or Alaska Native _____ Asian _____ White
_____ Black or African American _____ Native Hawaiian or Other Pacific Islander

Gender
Female ____
Male ____

| Have you ever attended Mitchell Technical Institute before? | Have you ever attended another college or technical institute? |
|---|---|
| ____ Yes ____ No | ____ Yes ____ No |

| Campus Dept. | Catalog Number | Sect No. | Course Title | Sem Hrs | Days | | | | | | Time | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | M | T | W | R | F | S | From | To |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

TOTAL CREDIT HOURS: _____

STUDENT SIGNATURE DATE

ADVISOR SIGNATURE DATE