

WESTERN IOWA TECH COMMUNITY COLLEGE

Enrollment Services

Class Schedule Form – Fall 2015 Semester

Please Print.

Legal Name							
-	Last	First		M.I.			
Student ID. #	Home Phone #()Da	y Phone #(<u>)</u>				
Permanent Address							
	Street	City	State	Zip			
Address While Attending WITCC							
	Street	City	State	Zip			

LIST ACADEMIC PROGRAM: Robotics 2st Year 1st Semester

Section	Course Title	Days	Dates	Time	Credits
03	IT Essentials I: PC Hardware & Software	M-TH	8/24 - 10/22	8:00 - 10:25	4
03	IT Essentials II: Adv. PC Hardware & Software	M-TH	10/26 - 12/22	1:00 - 3:45	3
01	PLC Applications	M-TH	10/28 - 12/22	8:00 - 10:10	3
01	Advanced Motor Controls	M-TH	8/27 - 10/22	1:00 - 3:25	3
01	Instrumentation II	M-TH	10/28 - 12/22	10:20 - 11:40	2
	03 03 01 01	03 IT Essentials I: PC Hardware & Software 03 IT Essentials II: Adv. PC Hardware & Software 01 PLC Applications 01 Advanced Motor Controls	03 IT Essentials I: PC Hardware & Software M-TH 03 IT Essentials II: Adv. PC Hardware & Software M-TH 01 PLC Applications M-TH 01 Advanced Motor Controls M-TH	03IT Essentials I: PC Hardware & SoftwareM-TH8/24 - 10/2203IT Essentials II: Adv. PC Hardware & SoftwareM-TH10/26 - 12/2201PLC ApplicationsM-TH10/28 - 12/2201Advanced Motor ControlsM-TH8/27 - 10/22	O3 IT Essentials I: PC Hardware & Software M-TH 8/24 - 10/22 8:00 - 10:25 03 IT Essentials II: Adv. PC Hardware & Software M-TH 10/26 - 12/22 1:00 - 3:45 01 PLC Applications M-TH 10/28 - 12/22 8:00 - 10:10 01 Advanced Motor Controls M-TH 8/27 - 10/22 1:00 - 3:25

Total Credits 15

Directory Information

In accordance with the Family Education Rights and Privacy Act of 1974 and amendments thereto, WITCC considers the following information as public information and will release such information without your consent: Name, Address, Telephone Number, Field of Study, Date of Attendance, Degree and Awards Received, and Educational Institutions Attended. If you do not wish this information released, contact the Enrollment Services Office for a Directory information Form. Directory information will not be withheld from law enforcement officials.

I understand this registration form becomes part of my official file at WITCC and creates a legal obligation on my part to pay required tuition and fees. I have read and agree to abide by the rules and regulations governing registration as published in the Fall 2015 Schedule of Classes.

Student's Signature	Office Use Only
Date	1. Address Change:
Advisor's Signature	2. Program Change: Registration Initials and Date:
Date	
(If Program change, LIST NEW PROGRAM:	. and NEW ADVISOR: .)

EDUCATIONAL GOAL (Choose 1)

Do you intend to graduate from WIT?

Graduate from WITCC GRD What degree are you pursuing? **Robotics & Automation AAS** Electromechanical Technician Diploma **Electrical Maintenance Certificate** If you do not intend to graduate from WIT, please choose from the list below. Do you intend to transfer to another institution? Transfer to Another TRF Are your educational goals for self-improvement? Self Improvement/Basics BAS Are your educational goals to meet license/certification requirements? Meet License/Cert LIC Other

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Not Available If NA, Explain: