PCC 1040
Rev. 11/09

Piedmont Community College
Trial Schedule

Semester_____

NAME:_____ Student ID # _____
(Last) (First) (MI)

ADDRESS_____

MAJOR_____ PHONE NO. _____

Will you graduate at the end of the semester? YES ☐ NO ☐

Course		SEC NO.	COURSE TITLE	CR HRS	CNT HRS	Days						TIME	BLDG.	ROOM
Prefix	NO.					M	T	W	Th	F	S			
			TOTALS											

Colleges and universities are asked by many, including the federal government, accrediting associations, college guides, newspapers, and your own college/university communities, to describe the racial/ethnic backgrounds of our students and employees. In order to respond to these requests, we ask you to answer the following two questions:

Do you consider yourself to be Hispanic/Latino Yes □ No□

***Select one or more of the racial* categories to describe you:**

___ Caucasian/White
___ African American/Black
___ American Indian/Alaskan Native
___ Asian
___ Native Hawaiian or Pacific Islander

Student's Signature _____

Advisor's Signature _____

Date _____