

"Train With Us And Experience The Difference!"

GALLUP CAMPUS 193 N US-491 GALLUP, NM 87301 ALBUQUERQUE CAMPUS
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STUDENT PRE-ENROLLMENT FORM

Name:		ENTER CLA	ASS DATE YOU WISH TO START:	
Date of Birth:				
Address:		Cho	pose your Course(s)	
City:	State:	Cla	ss A Tractor Trailer	
Zip Code: County:		Class B Passenger Bus		
Telephone: □ daytime □ evening □ cell		Driver Refresher		
Email Address:		Which Campus are you applying to:		
Do you need financial assistance/Tuiti What is your funding source or agency	·	□ yes	□ no	
Caseworker's Name (If Applicable): _				
	Name	Contact # or Email address		
I hereby apply for enrollment at Na has provided me with a digital or and terms of the Student Enrollme not guarantee employment nor conditions set forth by any signed	printed copy of the curre nt Agreement and any Fi guarantee any transfer agreements made betwe	nt 2022 Schoo nancial Optior of credits. I he	ol Catalog and explained the prog ons or Agreements Accepted. NNC reby agree to the terms, policies,	rams T does , or
Thave read and understand the abo	ove information.			
Applicant signature		Date		

In compliance with Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title VI and VII of the Civil Rights Act of 1964, the Americans with Disabilities Act, and other federal, state, and local laws, NNCT is committed to ensuring equal employment, educational opportunity, and equal access to services, programs and activities without regard to an individual's race, color, national origin, sex, religion, age, disability, gender, pregnancy, gender identity, sexual orientation, predisposing genetic characteristics, marital status, veteran status, military status, domestic violence victim status, or ex-offender status.

Print Name (title if applicable)