

Youth

July-Sept. 2019

Babysitting 101

Prerequisite: 10-14 years old

This interactive class will help you become a safe babysitter as it covers all aspects of being a great babysitter. You will learn about the business of babysitting, child development, safety, and fun ways to keep children entertained.

Keyword: Babysitting

Aug. 3	S	9 a.m.-Noon	\$29
York, YMS, FCS	Hornbacher		AREA-6399-YKUA
Sept. 21	S	9 a.m.-Noon	\$29
York, YMS, FCS	Hornbacher		AREA-6399-YKFA



Instructors to Teach Personal Interest Classes

SCC is seeking instructors who would enjoy teaching our Personal Interest classes.

From fitness to software, cooking to painting, we offer a variety of classes. Have a class you'd like to teach that we don't offer? Let us know.

Submit courses you would like to teach at:

<http://bit.ly/wanttoteachscc>

FREE TRAINING

For information on financial assistance options, visit www.southeast.edu/cefnassist

Location Key

York, YMS.....York Middle School, 1730 N. Delaware Ave.

Check out all classes offered at www.southeast.edu/YorkLC
Find us on Facebook at www.facebook.com/SCCLearningCenteratYork

For more information, contact **Heather Hultgrien** at 800-828-0072, ext. 3634, or hhultgrien@southeast.edu



REGISTER ONLINE

You must have an email account to register online.

- Go to <http://bit.ly/RegisterCE>
- Search for your class** by entering a **key word** in the title or the **course number**. Click **Submit**. (Enter information in only one field for broader results.)
Key Word Example: *Driver*
Course Number Example: *TRAN-3398*
- Select the course** for which you wish to register. Click **Submit**.
- Enter your **personal information, certify your identification** and click **Submit**.
* You must provide your Social Security Number.
- Optional:** Enter your **Additional Registration Information** and click **Submit**.

- If you want to register for additional classes, select **Search for more classes** under "Choose one of the following." If you are finished selecting the class(es) for which you want to register, select **Register now (check out)**. Select your **Payment Type**. Click **Submit**.
- Enter your **payment information**. Click **Submit**.

You will see your **class acknowledgement** with information about your **SCC Student ID Number, SCC User ID** and **password**. You also will receive an email with this same information for your records.

In the future it will be easy to register by logging in using your SCC User ID and password and it will not be necessary to provide your Social Security number again.

If you have problems getting registered, please call 402-437-2700 or 800-828-0072 for assistance.

* The College requires a student's Social Security number as a condition for enrollment online. A student's Social Security number information constitutes an "educational record" under FERPA.

OR REGISTER BY MAIL, FAX OR IN PERSON



Registration Form - Non-Credit Course

Today's Date

Complete this form with payment information and send via mail to Southeast Community College, Continuing Education, 301 S. 68th St. Place, Lincoln, NE 68510 OR FAX to 402-437-2703

PLEASE PRINT

The College requests, but does not require, a student provide their Social Security number during the admissions process. Visit www.southeast.edu/collegecatalog for additional information.

Social Security Number OR SCC Student ID Number		Birth Date	Name: Last		First	Middle Initial
Residence Mailing Address			City	State	Zip	County #
Email Address			Cell Phone	<input type="checkbox"/> Home <input type="checkbox"/> Business Phone		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Nebraska Resident <input type="checkbox"/> Non-Resident	Ethnicity (select one): <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		Race (Select one or more): <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Black/African-American		

COURSE NUMBER	TITLE	START DATE	COST
-	-	-	\$
-	-	-	\$
-	-	-	\$
-	-	-	\$

SIGNATURE

Check Cash Mastercard AMEX Discover VISA V Code _____

Name as it appears on card: _____

Exp.Date _____ CC # _____

Billing agency (INCLUDE LETTER OF AUTHORIZATION ON COMPANY LETTERHEAD)

For the protection of your personal credit card information, do not email this form to SCC. If faxing, only use the fax number listed or verify with SCC before using another SCC fax number.

Would you like a receipt mailed to you?
 Yes No

SCC Staff Tuition Waiver ()

TOTAL DUE

FOR OFFICE USE ONLY

ID# _____

DE _____

Submission of this form indicates that I understand: 1) that my registration is complete and that I am accountable for the tuition and fees and subject to a grade in the courses listed; 2) that should I officially drop, cancel, or withdraw, any refund in tuition will be determined by the date I submit my request to Continuing Education; 3) that failure to attend a course does not constitute an official drop/withdrawal; 4) the personal information contained herein is correct as shown; and 5) any changes in SSN, legal name, address, residency, etc. must follow the College procedures in the Student Handbook and College Catalog. It is the policy of SCC to provide equal opportunity and nondiscrimination in all admission, attendance, and employment matters to all persons without regard to race, color, religion, sex, age, marital status, national origin, ethnicity, veteran status, sexual orientation, disability, or other factors prohibited by law or College policy. Inquiries concerning the application of SCC's policies on equal opportunity and nondiscrimination should be directed to the Vice President for Access/Equity/Diversity, SCC Area Office, 301 S. 68th St. Place, Lincoln, NE 68510, or jsoto@southeast.edu.

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www.southeast.edu/continuing

