# Southeast Community College

### Home & Garden

Spring 2024

#### **Sensational Pots & Planters**

Take your pots and planters from standard to sensational! Expand your concept of container gardening by looking beyond the pair of pots by the front door to the role that mixed planters can play in your landscape, deck or patio. Container gardening offers both ease and opportunity for your most successful gardening experiences, even for those without a green thumb! In this informal, hands-on workshop, you will learn what plants will work best in your container and in a particular location. Then plant your own container to take home.

There is an \$15 fee (cash or check only) payable in class. Keyword: Pots April 11 Th 6-8 p.m. AREA-6080-FCSA \$19 . Falls City, FCLC, 102

#### Location Key

Falls City, FCLC...... Learning Center at Falls City, 3200 Bill Schock Blvd.

For more information, contact Lisa Hunzeker at 402-323-3396 or lhunzeker@southeast.edu.

#### Check out all classes offered at southeast.edu/FallsCityLC Find us on Facebook at facebook.com/SCCLearningCenteratFallsCity



#### Personalized Succulent Garden or Terrarium

Create your own dish garden or terrarium by mixing and matching easy-care small succulents. Personalize your planting by adding small decorative items, including a tiny handmade vintage-style sign of your own design.

There is a \$20 fee (cash or check only) if you bring your own container WITHOUT drain holes, measuring 5 inch-12 inch width by 3 inch-5 inch height. There is a \$30 fee (cash or check only) if you choose to purchase a container in class. Keyword: Garden

| May 7                 | Т       | 6-8 p.m.       | \$19 |
|-----------------------|---------|----------------|------|
| Falls City, FCLC, 102 | Perkins | AREA-6091-FCSB |      |

Cancellation/Refund Policy: You must call the Continuing Education office at 402-437-2700 or 800-828-0072 the day before the class begins to receive a 100% refund. If you call the day of the class or after it has started, no refund will be issued. If a class is cancelled or student drops (according to the refund policy), refunds will be issued to the student, unless a third party has been formally billed by SCC Business Office. ADA Reasonable Accommodations: SCC provides services and reasonable accommodations to allow persons with disabilities to participate in educational programs and other College activities. For information on requesting ADA reasonable accommodations, contact the SCC Area Access/Equity/Diversity Office.

| Southe                                                                                                                                                                           | Southeast Registration For |                                                                                                                                                                                                                                                                                                                                                      |       |                                    | m - Non-Credit Course                          |         |              |              |                    |                           | Today's Date |                   |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------|------------------------------------------------|---------|--------------|--------------|--------------------|---------------------------|--------------|-------------------|--|
| * Required PLEASE                                                                                                                                                                |                            | Complete this form with payment information and send via mail to Southeast Community College,<br>Continuing Education, 301 S. 68th St. Place, Lincoln, NE 68510 OR FAX to 402-437-2703<br>The College requests, but does not require, a student provide their Social Security number during the admissions process. Visit southeast.edu/academics/cd |       |                                    |                                                |         |              |              |                    | nics/college-             | //           |                   |  |
| Social Security Number OR SCC Stud                                                                                                                                               | ent ID Number              | * Birth Date                                                                                                                                                                                                                                                                                                                                         | Name: | : * Last                           |                                                |         | * Fi         | irst         |                    |                           | Middle       | Initial           |  |
| * Residence Mailing Address                                                                                                                                                      |                            |                                                                                                                                                                                                                                                                                                                                                      |       | * City                             |                                                | * State | *            | Zip          |                    |                           |              | County #          |  |
| * Email Address                                                                                                                                                                  |                            |                                                                                                                                                                                                                                                                                                                                                      |       | * 🖬 Cell Phor                      | ne 🗖 Home                                      |         |              | Business Pho | ne                 |                           |              |                   |  |
| I identify as: 🗅 Male 🗅 Female                                                                                                                                                   |                            | raska Resident<br>on-Resident                                                                                                                                                                                                                                                                                                                        |       | ity (select one)<br>panic or<br>no | ):<br>D Not Hispanic or<br>Latino              | 🛛 White |              | Asian        | □ Ar<br>Islander □ | nerican Ind<br>Black/Afri |              |                   |  |
| COL                                                                                                                                                                              | JRSE NUMBER                |                                                                                                                                                                                                                                                                                                                                                      |       |                                    | TITLE                                          |         |              |              | STAR               | T DATE                    |              | COST              |  |
|                                                                                                                                                                                  |                            |                                                                                                                                                                                                                                                                                                                                                      |       |                                    |                                                |         |              |              |                    |                           |              | \$                |  |
|                                                                                                                                                                                  |                            |                                                                                                                                                                                                                                                                                                                                                      |       |                                    |                                                |         |              |              |                    |                           |              | \$                |  |
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|                                                                                                                                                                                  |                            |                                                                                                                                                                                                                                                                                                                                                      |       |                                    |                                                |         | SCC Staff Tu | ition Maker  |                    | ,                         | FC           | R OFFICE USE ONLY |  |
| SIGNATURE<br>Check  Mastercard  AMEX  Discover  VISA V Code<br>(Checks may be converted into an electronic fund transfer, resulting in funds being held or removed immediately.) |                            |                                                                                                                                                                                                                                                                                                                                                      |       |                                    |                                                |         |              |              | )<br>ID#<br>DE     |                           |              |                   |  |
| □Check □Mastercard □AM                                                                                                                                                           | 1EX 🛛 Discove              | r □VISA V Code                                                                                                                                                                                                                                                                                                                                       |       |                                    | Would you like<br>receipt mailed to<br>Yes D N | you?    |              | TAL DU       | E                  | )                         | ID#          |                   |  |

## Register Online for SCC Continuing Education Classes

You must have an email account to register online.

- 1. Go to http://bit.ly/RegisterCE.
- Search for your class by entering either 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
- 3. 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.
- 5. Optional: Enter your Additional Registration Information and click Submit.
- 6. 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**.
- 7. 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**. **Print** this page 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. A student's Social Security number information constitutes an "educational record" under FERPA.