Short-Term Class Registration Form

Social Security #  Last Name  First Name  MI  Nickname

Street Address  City/Town  State  Zip Code  County

Home Phone  Cell Phone  Work Phone  Email  School District

( ) Male  ( ) Female  Single Parent  ( )

Race: Asian  Black  Hispanic  White  Handicapped / Disabled: ( ) Yes  ( ) No

Economically Disadvantaged: ( ) Yes  ( ) No

Employment Status: ( ) Unemployed  ( ) Working Full-Time  ( ) Displaced Worker
( ) Retired  ( ) Working Part-Time  ( ) Laid-off

Are you presently a student at Somerset County Technology Center?  ____yes  ____no
Have you ever been a student at Somerset County Technology Center?  ____yes  ____no

Policies:
1. Tuition is due in full at the time of registration.
2. Unless specified, cost is for tuition only. All courses usually have additional costs for books and some supplies.
3. There are no tuition refunds once classes begin.
4. All listed courses will be offered if a minimum of six (6) individuals enroll and if a qualified instructor is available. Otherwise, the course is subject to cancellation.
5. Course day and hours are subject to change. Classes are not scheduled on school holidays and may be cancelled due to weather conditions and other unforeseen circumstances.
6. A certificate is presented if students attend 90% of classes and have met minimum course grade requirements.
7. As per federal law, usage of tobacco in any form is forbidden on SCTC property. This includes cars parked on school property. Violators are subject to prosecution.
8. I have read and understand the above policies.

Signature ____________________________  Date: ______________

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Begin Date</th>
<th>Time</th>
<th>Course Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date Pd  C/Ck#/CC  Total Cost

If your employer is paying, please provide the information below:

Agency’s Name  Contact Person  Telephone #  Fax #

Street Address  City/Town  State  Zip Code

FOR CREDIT CARD USE ONLY  □ VISA  □ MASTER CARD  □ DISCOVER

Account No. ____________________________  Date of Expiration ____________  V Code ____________________

REGISTRATION OFFICE USE ONLY

Amount Paid ____________________________

Cash  Check  Credit Card