



Mildred Elley—Latham, NY Campus
 800 New Loudon Rd Ste 5120
 Latham, NY 12110
 (518) 786-3171 Phone
 (518) 786-0898 Fax

Mildred Elley—Pittsfield, MA Campus
 505 East St Ste 107
 Pittsfield, MA 01201
 (413) 442-0333 Phone
 (413) 442-2269 Fax

CONTINUING AND PROFESSIONAL EDUCATION COURSE REGISTRATION FORM

| Student Information | | | |
|---|---|---|---|
| <i>Last Name, First/Middle Names</i> | | | <i>Gender (circle)</i> M F |
| <i>Date of Birth (MM/DD/YY)</i> | <i>Social Security Number (NNN-NN-NNNN)</i> | <i>Have you previously taken courses at Mildred Elley?</i> Yes No | <i>Student ID Number (if assigned)</i> |
| <i>Home Address (No., Street, Apt.)</i> | | <i>Home Address (City, State, Zip Code)</i> | |
| <i>Home Phone Number</i> () - | <i>Mobile Phone Number</i> () - | <i>E-Mail Address (Please spell clearly)</i> @ | |
| Course Registration Information | | Please register me for the following credit-bearing courses offered by the Mildred Elley. I agree to abide by the policies of the institution at all times. | |
| <i>Campus of Enrollment (Circle One)</i> Latham Pittsfield | <i>Module (e.g., Spring I 2006)</i> | <i>Choose one, if applicable (Latham Campus only)</i> Weekday Weekend | |
| <i>Course Code, Number, Section</i> | <i>Course Name</i> | <i>Credit Hours</i> | <i>Days and Dates Offered</i> |
| <i>Course Code, Number, Section</i> | <i>Course Name</i> | <i>Credit Hours</i> | <i>Days and Dates Offered</i> |
| <i>Course Code, Number, Section</i> | <i>Course Name</i> | <i>Credit Hours</i> | <i>Days and Dates Offered</i> |
| <i>Course Code, Number, Section</i> | <i>Course Name</i> | <i>Credit Hours</i> | <i>Days and Dates Offered</i> |

Tuition Payment Information

| | | | | | | | | |
|------------------|----------|--------------------|----------|-----------|-----------------|---------------|---------------------|-------------------------|
| Semester Credits | x | Tuition per Credit | = | Tuition | Application Fee | Lab/Tech Fees | Grants/Scholarships | Total, Tuition and Fees |
| | x | \$ | = | \$ | +\$ | +\$ | -\$ | =\$ |

Payment Option 1 – Please note student’s name and course code/number/section on the check/money order memo field

Check/money order payable to **Mildred Elley** is enclosed with this application.

Payment Option 2

Please charge my credit card.

| | | | | |
|-------------------|-------------|-----------------|-----------------|----------------------|
| Card Type: Circle | Card Number | Cardholder Name | Expiration Date | Cardholder Signature |
| Visa or MC | | | | |

Payment Option 3

Cash Payment: Payable at Mildred Elley offices. Please make arrangements at the time of registration.

Payment Option 4

Employer Reimbursement or CSEA Voucher. Please make arrangements at the time of registration.

Signature

| | | |
|---------------------|--------------------------|-----------------|
| Applicant Signature | Applicant – Printed Name | Date (MM/DD/YY) |
| | | |

Mildred Elley Use Only

| | | | |
|---------------------------------------|--|------------------------------|---------|
| Application Received – Date, Initials | Registration Confirmation – Date, Initials | Admissions/Advisor Clearance | Notes |
| | | | |
| Student Accounts Clearance | Registrar Clearance | Field 1 | Field 2 |
| | | | |