

REGISTRATION FORM

Student ID (if known) G _____ Social Security # XXX - XX - _____

First Name: _____ Middle _____ Last Name _____

Home Address _____ County _____

City _____ State, Zip Code: _____

Date of Birth: mo/ _____ date / _____ year/ _____ Home Phone (_____) _____

Cell Phone (_____) _____ Work Phone (_____) _____

Email address _____ Female _____ Male _____

- Ethnic**
- African-American
 - Asian
 - Caucasian
 - Hispanic/Latino
 - Other

- Educational Goal**
- Obtain Certificate
 - Job Advancement
 - Maintain Licensure
 - Personal Development

- Completed Educational Level:**
- High School
 - Associates Degree
 - Bachelor Degree
 - Masters Degree
 - Doctorate Degree

CRN #	Course Title	Start Date	Fee
			\$
			\$
			\$
			\$
			\$
Total Fee			\$

Payment options for Workforce Development course fees:

1) Register online www.raritanval.edu/workforce – We accept VISA, MasterCard & Discover (no AMEX).

2) Cash, Amount: \$ _____ 3) Check # _____ Date _____ Amount: \$ _____

If paying by check, please make payable to: **RVC College**

4) Sallie Mae Payment Plan –student must include a copy of Plan Contract showing name and total amount.

Contract Attached? _____ (yes)

5) Purchase Orders must be submitted with a completed Registration Form. They must be signed, dated and include the following registration details: 1) student name 2) course title 3) start date and 4) amount.

REFUND POLICY

A student enrolled in a course section that is cancelled by the College is given the opportunity to enroll in an alternate course section or to receive a full refund of all tuition, registration fees, and materials fees associated with the cancelled course section.

A student who withdraws from a course section during the refund period receives a 100% refund of all tuition and materials fees associated with the course. The registration fee is not refunded. After the refund period, no tuition or fees shall be refunded. The refund period is 5 or more business days prior to the start of the first class date. ALL CANCELLATION REQUESTS MUST BE RECEIVED IN WRITING. You may email your cancellation request to workforce@raritanval.edu.

MAILING ADDRESS for Workforce Development at Bridgewater (RVCC@Bridgewater)
 Raritan Valley Community College, Workforce Development, PO Box 3300, Somerville, NJ 08876