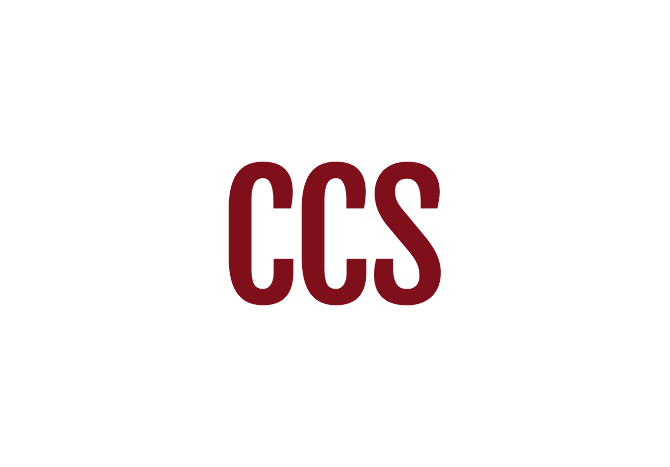
****

**Course Registration Form**

Please complete the below and submit to [Registration@corporatecollegeservices.com](mailto:Registration@corporatecollegeservices.com) by the deadline.

**Note:** Registration correspondence and an invoice will be sent to the email address provided on this form.

**□ Address Change**

Current Name:

LAST FIRST M.I.

Mailing Address:

NUMBER STREET

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

CITY STATE ZIP

Telephone: ( ) e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COURSE INFORMATION:**

Term: □ January/February □ March/April □ May/June □ July/August

□ September/October □ November/December

Year: \_\_\_\_\_\_\_\_\_ Course:

NUMBER TITLE

Upon receipt of payment, a course registration confirmation will be sent via email. Students are not registered if registration forms are incomplete or a payment is not made by the deadline. Registering during the late registration period will incur additional fees.

By signing below, I understand it is my responsibility to comply with and be bound by all requirements, policies and fee schedules as set forth by CCS.

SIGNATURE DATE

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For internal use only:**

Received: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Approved: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Invoice Sent: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Pymt Rec’d: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Confirmation: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Rev. 05/13/24