

CPI

Central Pennsylvania Institute of Science and Technology

Adult & Continuing Education Registration Form

(All information on this form must be completed and returned with your tuition to
CPI Adult and Continuing Education, 540 N. Harrison Road, Pleasant Gap, PA 16823)

Course _____

Course Code _____ Registration Fee _____

Last Name _____ First Name _____

Middle Name _____ Social Security Number _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Cell Phone _____ Birth Date _____

Method of Payment

Check # _____ Money Order # _____

Visa or MasterCard # _____

Expiration Date _____

The following information is used to ensure programs that suit our community's needs. The information will in no way be used to determine eligibility for entrance into programs.

Male Female Age _____

American Indian/Alaskan National Asian/Pacific Islander Black (Non-Hispanic)
Hispanic White (Non-Hispanic)

Disabled Displaced Homemaker Economically Disadvantaged Single Parent
Educationally Disadvantaged Limited English Proficiency

Please read and sign the following statement:

I understand the following:

1. No refunds will be made after the second class for any reason.
2. The school is not liable for damage or theft or any personal belongings brought on premises by students or payment of medical expenses or damage due to bodily injury, self-inflicted or by another student.

Signature _____ Date _____

Central Pennsylvania Institute of Science and Technology request social security numbers for the purpose of enrollment to verify your identity for official record keeping and reporting. If you choose not to provide your social security number - financial aid may not be available to you.