Mail-in / Fax-in Registration Form – Professional Education

BE SURE TO REGISTER EARLY FOR BEST SELECTION OF CLASSES!

REGISTRATION FORM

Please complete all questions on this registration form.

Last Name:
First Name:
Middle Initial:
Street:
City:
State:
Zip Code:
Home Phone: ( )
Cell Phone: ( ) ext.
Email Address:
Student ID #: (if known)

Students with documented disabilities who anticipate the need for accommodations are encouraged to visit www.northshore.edu/accessibility and follow the outlined procedure to request accommodations at least 4-6 weeks before the start of classes. Accessibility Services provides academic accommodations and services for students with disabilities so as to provide equal access and opportunity to programs and activities. For more information, please visit our website or call: Danvers Campus: 978-762-4000, x4501 or Lynn Campus: 781-593-6722, x2134.

Semester/Year: Fall: 20 | Winter: 20 | Summer: 20

Date of Birth: (Required) Month: | Day: | Year:

High School Name:

High School Graduation Year: GED: Yes No

Please fill the appropriate circle for demographic purposes:

1- Gender: M F
2- US Citizenship: Yes No
If no, are you a Resident Alien (Green Card)? Yes No
3- Permission to be listed in a public student directory: Yes No
4- Is English your primary language: Yes No
5- Attended another college: Yes No
6- Race: White Black Hispanic Asian Nat. Amer. Other

CRN	Course Code	Sec	Course Title	Day	Time	Noncredit Course Cost
Program of Study (see list on page 2 of catalog):						$

Noncredit Total

Student Signature _____ Date _____

Please Note: We cannot accept cash payments. Personal checks, bank money orders and MasterCard/Discover/Visa are acceptable.

For Mail-in and Fax-in, use MasterCard, Visa or Discover. Please complete the following:

Account No.: _____ Expiration Date (mo)_____ /(yr) _____

Cardholder's Signature _____ Print Cardholder Name _____

Parent/Guardian Info for Students under age 18

Last Name:
First Name:
Home Phone: ( )
Cell Phone: ( )

Address:
City:
State: Zip:
Email Address:

Mail completed registration form along with your payment to:

North Shore Community College, Enrollment & Records Office, 1 Ferncroft Road, Danvers, MA 01923-08402

Or, fax (with your Visa, MasterCard, or Discover Card number) to: **978-762-4015**