

# SJRCC Continuing Education Registration Form

**TO REGISTER:** Continuing Education registration is on-going. Completed registration form and payment must be received before noon on the last business day before the first course session. Go to <http://sjrcc.edu> for exact registration dates.

- **Walk In:** Register in person at any SJRCC Campus in the Records Office or Administration Building.
- **By Fax:** Fax completed Registration Form to (386) 312-4048.
- **By Mail:** Mail completed Registration Form, with a check or money order (do not send cash), to the SJRCC Records Office, 5001 St. Johns Avenue, Palatka, FL 32177. To make a credit card payment, please call the SJRCC Business Office at 386-312-4117.

Published Continuing Education course schedule is subject to change. For the latest Continuing Education course offerings, go to <http://sjrcc.edu> or call 386-312-4211. To receive a refund for a Continuing Education course, students must complete and submit a Course Withdrawal Form to SJRCC's Records Office prior to the first scheduled class meeting. No refunds after classes begin.

|  |  |                         |  |
|--|--|-------------------------|--|
| <b>Name:</b> Last _____ First _____ Middle _____ Previous _____                        |  |                         |  |
| <b>Social Security #:</b> _____  |  | <b>Birthdate:</b> _____ |  |
| <b>Gender-Check One:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female |  |                         |  |
| <b>Address</b> (include City, State, and Zip): _____                                   |  |                         |  |
| <b>Telephone:</b> Home (_____) _____   |  | Cell (_____) _____      |  |
| Email: _____   |  |                         |  |

|  |  |  |   |   |
|--|--|--|---|---|
| <b>Ethnicity-Check One (Optional):</b>                           |  |  |   |   |
| <input type="checkbox"/> White                                   | <input type="checkbox"/> Black             | <input type="checkbox"/> Hispanic  | <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> American Indian/Alaskan Native |
| <b>Citizenship-Check One:</b>                                    |  |  |   |   |
| <input type="checkbox"/> U.S. Citizen                            | <input type="checkbox"/> Non-U.S. Citizen* | *If you are not a US citizen, indicate Country of Citizenship: _____       |   |   |
| *Permanent Resident Aliens indicate Resident Alien Number: _____ |  | *Non-Resident Aliens indicate VISA held and expiration date of VISA: _____ |   |   |

|   |   |
|---|---|
| <b>Residency Affidavit – Check One, Sign, and Date:</b> |   |
| <input type="checkbox"/>                                | <b>Florida Resident:</b> I am a United States citizen or have been admitted to the United States as an immigrant. I am a bona fide citizen, resident and domiciliary of the State of Florida and have resided in the State Florida a minimum of 12 months. I certify that the above information is correct. |
| <input type="checkbox"/>                                | <b>Non-Florida Resident:</b> I do not qualify for classification as a Florida Resident.   |
| _____   | _____   |
| <b>Applicant's Signature (sign in ink)</b>              | <b>Date</b>   |

**STUDENT ACCOMODATIONS:** If you require special services due to a disability, notify the Counseling Office on the campus nearest you a minimum of one week before the course start date so appropriate accommodations can be arranged. This information is confidential and does not affect your admission to the college.

| CRN | Course # | Course Title | Start & End Dates | Time | Day | Campus & Room | Fee |
|-----|----------|--------------|-------------------|------|-----|---------------|-----|
|     |          |              |                   |      |     |               |     |
|     |          |              |                   |      |     |               |     |
|     |          |              |                   |      |     |               |     |
|     |          |              |                   |      |     |               |     |
|     |          |              |                   |      |     |               |     |
|     |          |              |                   |      |     |               |     |

**Fax & Mail-in Registration Only:**

Complete entire form and FAX to 386-312-4048 or mail to SJRCC Records Office, 5001 St. Johns Avenue, Palatka, FL 32177.

For payment with a check, please send registration form and check to:  
 SJRCC Records Office, 5001 St. Johns Avenue, Palatka, FL 32177

For payment with a credit card, please call, the SJRCC Business Office at 386-312-4117.