



BCIT ADULT EDUCATION REGISTRATION

Walk-in

Online Registration: www.bcit.cc/adulted

Fax: 609-267-3752

Mail-in: B.C.I.T. Adult Education

695 Woodlane Road

Westampton, NJ 08060

Checks: payable to B.C.I.T.

Are you utilizing Financial Aid? Yes No

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

- Cosmetology, LPN, Dental Assisting and Medical Assisting are the only programs eligible to use Financial Aid.

- Please visit our website and click Financial Aid for more information and to review the steps needed to determine your eligibility.

Fall Spring Summer Apprentice-Employer Employer Phone

Last Name: First Name: MI:

(Name as it should appear on certificate PLEASE PRINT)

Street Address

City State Zip

Home Phone Cell Phone Emergency Phone

E-mail Address (required):

\*\* Information regarding Age, Gender and Ethnic Background is required for federal reporting only \*\*

Ethnicity: White/Caucasian Black/African-American Hispanic/Latino Native Hawaiian/Pacific Islander Asian American Indian/Alaskan Multi-racial

Gender: Male Female Birthdate: Social Security:

TUITION REFUND POLICY AND INFORMATION:

Refund requests must be in writing, and will be honored up to 24 hours prior to the 1st class with the exception of Practical Nursing, Certified Nurse Aide, Certified Homemaker/Home Health Aide, CDL Truck Driving, BLS, and TEAS testing. Withdrawals made less than 60 days prior to the start date of Practical Nursing are not eligible for reimbursement of acceptance fees. Withdrawals for Certified Nurse Aide and Certified Homemaker/Home Health Aide must be made at least 14 days prior to the start date of class. Withdrawals for CDL Truck Driving must be made at least 7 days prior to the start date to be eligible for a refund. There will be no refunds or transfers for TEAS testing and BLS, NO EXCEPTIONS! A \$25.00 registration fee will be deducted from the amount to be refunded for any class. If you have questions concerning this policy, please contact the Adult Education Office. A \$50.00 out of county residency fee will be applied to all classes, if applicable. There is an additional cost for make-up time / hours, if needed.

Student's Signature:

Program of Study:

#1 Course Code Course Title (Circle days) M T W Th F Sa

Note: Registration is not complete until payment is made in full Accepted Credit Cards: Visa, MasterCard, Discover Senior Citizens (50+) \$10 discount must be requested at time of registration. Must register in person for discount offer. BCIT High School Alumni 10% discount must be requested at time of registration. Must register in person for discount offer.

Payment and office use section with checkboxes for payment methods and fields for amount paid, received by, and date.

## Enrollment Data

The Burlington County Institute of Technology Adult Education Office is required to collect the below information for federal reporting upon enrollment in our courses. **Please note: Your responses will remain anonymous and confidential with this office.**

**Student Name:** \_\_\_\_\_ **Class:** \_\_\_\_\_

**Disability Status:**             Disabled             Non-Disabled             Unknown

**Educational Level of Education at Enrollment:**

High School Graduate             Some College or Technical School             Associate Degree  
 Bachelor's Degree             Graduate Degree             Unknown

**Employment Status at Enrollment:**

Employed, Full-Time             Employed, Part-Time             Not Employed  
 Unknown             Not in the Labor Force

**How did you hear about us:**

Direct Mailing             Employment Weekly             Online  
 Rowan College at Burlington County Catalog             Other: \_\_\_\_\_

***Thank you in advance for providing the above-noted information.***