



Career Development Center

SOUTHWEST VERMONT REGIONAL TECHNICAL SCHOOL DISTRICT

Arlington Bennington Dorset Glastenbury North Bennington Manchester Pownal Readsboro Sandgate Searsburg Shaftsbury Stamford Sunderland Woodford

Day & Evening Registration Form

STUDENT INFORMATION

Last Name:		First Name:		Middle Initial:	
Street:					
City:		State:	Zip Code:		
Home Phone:		Cell Phone:			
Work Phone:		EXT:	Date of Birth:		
Email:			Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		
Ethnic Origin (Optional): <input type="checkbox"/> Black (not Hispanic) <input type="checkbox"/> White (not Hispanic) <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Other	Education: <input type="checkbox"/> No High School Diploma <input type="checkbox"/> GED <input type="checkbox"/> High School Diploma <input type="checkbox"/> Some College, no degree <input type="checkbox"/> Associate's Degree <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Graduate Degree		Main reason for enrolling? <input type="checkbox"/> Acquire a specific skill <input type="checkbox"/> Obtain employment <input type="checkbox"/> Upgrade employment <input type="checkbox"/> Apprenticeship <input type="checkbox"/> Personal enrichment <input type="checkbox"/> Have taken classes before <input type="checkbox"/> Other		
How did you learn about the programs/class? <input type="checkbox"/> Bennington Banner <input type="checkbox"/> Brochure <input type="checkbox"/> Email <input type="checkbox"/> Employer <input type="checkbox"/> Facebook/Twitter <input type="checkbox"/> Mailing		<input type="checkbox"/> State/Federal Agency <input type="checkbox"/> VSAC or Voc. Rehab. <input type="checkbox"/> Website <input type="checkbox"/> Friend or Neighbor <input type="checkbox"/> Other _____	Tuition Paid by (check all that apply): <input type="checkbox"/> Student <input type="checkbox"/> Employer <input type="checkbox"/> Grant <input type="checkbox"/> Parent <input type="checkbox"/> Student's School District <input type="checkbox"/> Other _____		<input type="checkbox"/> VA Benefits <input type="checkbox"/> Voc. Rehab. <input type="checkbox"/> VSAC <input type="checkbox"/> WIA - VTDoL <input type="checkbox"/> Worker's Comp <input type="checkbox"/> NHSD/GED

DAY TECHNICAL PROGRAMS

<input type="checkbox"/> Accounting & Finance <input type="checkbox"/> Auto Technology <input type="checkbox"/> Building Trades <input type="checkbox"/> Business Management <input type="checkbox"/> Cosmetology	<input type="checkbox"/> Culinary Arts <input type="checkbox"/> Manufacturing Technology <input type="checkbox"/> Forestry & Heavy Equipment <input type="checkbox"/> Human Services <input type="checkbox"/> Law Enforcement	<input type="checkbox"/> Medical Professions <input type="checkbox"/> Pre-Law <input type="checkbox"/> Theater Arts <input type="checkbox"/> Video Production
---	---	--

EVENING CLASSES

Course Number	Course Title	Start Date	Time	Tuition

Tuition must be paid in full within the first week of classes. Classes that are offered once, must be paid in full before class starts.		TOTAL TUITION:
Payment Type: <input type="checkbox"/> Check <input type="checkbox"/> Cash (Walk-in registration only) <input type="checkbox"/> Credit card	<input type="checkbox"/> Credit card <input type="checkbox"/> Debit Card <input type="checkbox"/> Other	OFFICE USE ONLY:

Student Signature: _____ Date: _____

By signing above, the student is agreeing to pay tuition according to the above requirements.

The Career Development Center does not discriminate on the basis of age, sex, race, disability, sexual orientation, creed, or national origin. Course enrollment does not depend on these characteristics.