

CONTRACT #:			DATATEL #: 66048		
Legal Name (PRINT) Last	First		Middle Initial		
Mailing Address		City		State	Zip
County Ho	me Phone	Cell	Phone	Work F	Phone & Ext
Date of Birth Gender M F Educational Level (choose highest level completed):  Ethnic Background:  Non Hispanic/Latino Hispanic /Latino  Race (choose one or more): White Black/African American Hawaiian/Pacific Islander American/Alaska Native    Mile   Mil					
Student email address:					
I certify that I am 18 years of age or older and not enrolled in public schools. I authorize class information be released to appropriate certifying agency and/or Dept. Officer.  I certify that I am 18 years of age or younger, enrolled in public school, and have provided a dual enrollment form my high school.					
Signature	Date	—   <del>इ</del>	Signature		Date
DATATEL ID # 66048	COURSE CODE/SECTION: ELC 3016A COURSE TITLE: Electrical Update				
Days Friday	Time 8-5pm	Start 3/20/	t Date End Date 3/20/15		
Instructor Albert Russell Location Desco	8To register by mail, complete, attach payment and mail to: Rowan Cabarrus Community College Con-Ed Registration, North Campus PO Box 1595 Salisbury, NC 28145-1595 To register by email & pay by credit card: complete form and email to coned@rowancabarrus.edu				
FOR OFFICE ONLY					
Payment amount \$ to be compared to b	Waiver?    CESEN				
Date fee to Bus. Office: Employer Name if paid by Employer:			Data entry by: Data entry date		

Created: 11/10