



UNDERGRADUATE COURSE REGISTRATION FORM

Use this form to register for Guided Study, Prior Learning Assessment (PLA), Online, Nursing, FlashTrack and e-Pack® courses

Submit this completed form with payment to:

Office of the Registrar
 Thomas Edison State College
 Course Registration
 101 W. State St.
 Trenton, NJ 08608-1176
 Office (609) 633-9242
 Fax (609) 292-1657

COPY THIS FORM AS NEEDED

Please check the semester you want:

- | | | |
|---|--|-------------------------------------|
| <input type="checkbox"/> July 2009 | <input type="checkbox"/> November 2009 | <input type="checkbox"/> March 2010 |
| <input type="checkbox"/> August 2009 | <input type="checkbox"/> December 2009 | <input type="checkbox"/> April 2010 |
| <input type="checkbox"/> September 2009 | <input type="checkbox"/> January 2010 | <input type="checkbox"/> May 2010 |
| <input type="checkbox"/> October 2009 | <input type="checkbox"/> February 2010 | <input type="checkbox"/> June 2010 |

You may call in your registration at (609) 633-9242 or register online at www.tesc.edu

Telephone registrations are accepted with a credit card from 11 a.m. - 3 p.m., EST/EDT during scheduled registration sessions.

You may register online, or fax or mail your registration 24 hours a day during scheduled registration sessions. Include your credit card number or other payment information.

GENERAL INFORMATION

Check if this is an address change.

Student Identification Number _____

Last Name	First Name	MI	
Street Address ()	City ()	State	ZIP Code
Daytime Telephone Number		Evening Telephone Number	

E-mail Address *required for GS, BL, OL, PA, NU, NG, PR and EP courses

COURSE REGISTRATION

List the course(s) for which you wish to register below. Include the complete course code (consisting of a three-letter discipline abbreviation, three-digit course number and two-digit suffix of GS, BL, FT, OL, PA, EP, NU, NG or PR), the course title and applicable tuition. You are responsible for all prerequisites. **If you wish a specific mentor, write that mentor's name next to the course title.** We will assign you that mentor if available. If you are enrolled in a special population program such as the Military Degree Completion Program (MDCP), Navy College Program Distance Learning Partnership (NCPDLP), Corporate Choice® or Bachelor of Science in Nursing degree program please refer to your program tuition and fee structure information for appropriate tuition and fee costs. Do not include registrations for TECEP® examinations.

- Students are responsible for meeting all course prerequisites prior to registering.
- Registrations received without complete information or total payment will not be processed and will be returned.
- Students who have paid the College's Comprehensive Tuition are still responsible for payment for course materials and any late fees that may apply and must purchase their course materials package from MBS Direct.

Complete Course Code	Course Title	Tuition

COURSE CODE SUFFIX KEY:

GS = Guided Study	FT = FlashTrack
EP = e-Pack® courses	OL = Online course
PA = Prior Learning Assessment	NU = Nursing
PR = Practicum	NG = Nursing Graduate
	BL = Blended

SAMPLE COMPLETE COURSE CODES:
 COS-101-GS SOC-210-OL STA-101-EP

Total Tuition \$ _____
 Registration Fee \$ _____
 Late Fee if applicable \$ _____
TOTAL PAYMENT \$ _____

*For complete tuition and fees information, please see the enclosed Tuition and Fees Schedule. You may also refer to College Web site at www.tesc.edu, and click on Tuition and Financial Aid.

Student Name _____

Student Identification Number _____

CHECKLIST

- Do you certify that prerequisites for all courses have been met? Yes No
- Are you a member of the United States military? Yes No
- If you have recently applied, when was your application submitted? _____
- Are you an enrolled Thomas Edison State College student? Yes No
- Is this your final course prior to graduation? If so, have you reviewed the graduation schedule on Page 19? Yes No
- Is this your first Thomas Edison State College course? Yes No
- If you are an enrolled student, have you reviewed your course with an academic advisor to determine if appropriate to your program of studies?** Yes No

Note: review with academic advisor does not establish registration.

PAYMENT INFORMATION

- I am currently enrolled under the Comprehensive Tuition Plan.* If not, please check method of payment.
- Check/Money Order Credit Card Thomas Edison State College Financial Aid Military/Corporation/Agency Assistance Plan**

Make check/money order payable to: **Thomas Edison State College**

Cash payments must be made in person, and are accepted only at: **Office of the Bursar**, 221 W. Hanover St., Trenton, NJ 08608-1176, *after* the registrar has processed the registration at the Academic Center.

TUITION AID or MILITARY/CORPORATE/AGENCY NAME: _____

If your employer is providing tuition assistance, provide your employer's address and the contact person:

Contact Name _____

Street Address _____ City _____ State _____ ZIP Code _____

Employer's Telephone Number _____ Fax Number (if available) _____ E-mail Address (if available) _____

* THE COMPREHENSIVE TUITION COVERS ONLY THE REGISTRATION FEE AND COURSE TUITION COSTS.
 YOU MUST STILL PAY ANY LATE REGISTRATION FEE IF APPLICABLE AND ORDER YOUR COURSE MATERIALS FROM MBS DIRECT.
 ** TUITION ASSISTANCE AUTHORIZATION/DOCUMENTATION MUST ACCOMPANY THIS REGISTRATION FORM OR REGISTRATION WILL NOT BE PROCESSED AND WILL BE RETURNED.

CREDIT CARD AUTHORIZATION

CREDIT CARD: AMERICAN EXPRESS VISA MASTERCARD DISCOVER

ACCOUNT NUMBER: _____ Total Payment Amount From Other Side: _____

CARD EXPIRATION DATE: _____ Authorization Signature/Date (required): _____

STUDENT SIGNATURE

I hereby certify that the above statements are true and correct to the best of my knowledge and that I meet the prerequisites as listed for each course for which I have registered. I have read the current Registration Bulletin and agree to abide by it. I authorize the release of grade information on the above course(s) to my employer, if my employer is paying for my course(s). By signing this form, I verify that I understand and agree to abide by the complete policy on academic integrity and procedures for discipline of academic integrity violations as stated in the College Catalog.

Student Signature _____ Date _____

Thomas Edison State College is committed to providing reasonable accommodation for verified disability. If you would like information on reasonable accommodation for disability, please contact the ADA coordinator at (609) 984-1141, ext. 3415 (voice), (609) 341-3109 (TTY).

OFFICE OF THE REGISTRAR'S USE ONLY	Notes:
Taken by: _____	_____
Date: _____	_____