

Washington Teacher's Union (WTU) Summer 2011 Courses Professional Development Registration Form

STEP 1

Is this a change of Name or Address? Yes No

Name: _____

Address: _____
Street Address

City _____ State _____ ZIP Code _____

@ _____
E-mail Address

Phone (H): _____

Phone (W): _____

Soc. Sec. #: _____

Date of Birth _____

TUITION AND FEES

\$375 per course –Tuition for 3 credit WTU course

Non-refundable Fees

Drop Fee: \$50 (drop form must be submitted before the first class)

Late Registration Fee: \$50 Registrations with required documentation (see Step #2 below) and payment to Trinity should be given to Claudette Carson by September 20, 2011 to avoid a \$50 late fee. Late registrations with a \$50 late registration fee will be accepted until 9/27/11 on a space available basis.

STEP 2 Admission Requirement

Have you received credit from Trinity? Yes No*

* **If NO**, with this form you must submit a copy of official documentation of an undergraduate degree: a final transcript, Bachelor's diploma, or Teaching License (if degree status is indicated on the Teaching License).

DEGREE(S) HELD: Please check those that apply to you:

- B.A. M.A. M.A.T. M.Ed.
 Ed.D. Ph.D. J.D. Other

STEP 3 Payment Method

(must be submitted to register)

Personal Check* Money Order

***Make Checks Payable to Trinity Washington University**

Please complete below when paying by Credit Card:

American Express Discover
 Master Card Visa

Account Number: _____

Expiration Date: _ _ / _ _

STEP 4 Please complete the table below:

Course #	Course Title	Dates	Register	→ by 9/20	→ by 9/27
				\$375	\$425
Are you a new student to Trinity? → See Step #2 above for Admission Requirements. Without degree proof, no grade will be released.			Total		

I understand that I am responsible for and agree to pay all charges I incur at Trinity, whether or not my employer initially agreed to pay my tuition. If I withdraw, I must do so in accordance with the policies and procedures for the semester in which I am enrolling. I understand that if my account becomes delinquent, I will be liable for collection of legal costs. My signature below is approval for the release of my report card to my address above.

Signature

Date

STEP 5	Washington Teacher's Union– Office of Professional Development	Telephone: 202-293-8615
Return this form with payment to:	1825 K Street, N.W. Suite 1050 Washington, D.C. 20006	Fax: 202-293-8633