John A. Logan College
Carterville, IL 62918

Continuing Education Registration Form

Pre-Register by: Mail – Send registration form to: John A. Logan College, Office of Continuing Education, 700 Logan College Road, Carterville, IL 62918
Walk-in – Campus Locations: Bldg. H (formerly Office Bldg.), Room 104 (8:00 a.m. – 4:30 p.m., M-F)
Admissions Office (8:00 a.m. – 8:00 p.m., M-Th) (8:00 a.m. – 4:30 p.m., F)
Fax – Fax registration form with credit card information to: (618) 985-2762. Web Site: www.jalc.edu/cont_ed

STUDENT INFORMATION				
Last Name	First Name		Middle Initial	Social Security # or Student ID #
Street Address	City		State	Zip Code
Date of Birth Mo/Day/Yr / /	Sex: Male Female	Home Phone No. (Plus area code)	Business Phone No. (Plus area code)	E-mail Address

COUNTY OF RESIDENCE
Williamson..... (199)
Jackson..... (077)
Franklin ..... (055)
Randolph..... (157)
Perry..... (145)
_____
(specify other)

ETHNIC ORIGIN
Asian (Pacific Islander).....(1)
American Indian.....(2)
Black Non-Hispanic .....(3)
Hispanic.....(4)
White Non-Hispanic.....(5)
Non-Resident, Alien.....(6)

RESIDENCE STATUS.
In-district.....(1)
Out-of-district....(2)

HIGHEST DEGREE EARNED
(D) Doctoral Degree
(P) 1st Professional Degree
(M) Master's Degree
(B) Bachelor's Degree
(A) Associate Degree
(C) Certificate
(S) Some College
(H) High School Diploma
(G) GED
(N) None
(O) Other

STUDENT INTENT
To prepare for transfer to a 4-yr college or university.
To improve skills for my present job.
To prepare for future job immediately after attending community college.
To prepare for the GED test or improve basic academic skills.
For personal interest/self-development (not career-oriented).
Unknown/other.

HIGH SCHOOLS ATTENDED

140510 – Carbondale	142250 – Herrin	140485 – Trico
140555 – Carterville	142365 – Johnston City	999999 – Other
142770 – Crab Orchard	142775 – Marion	(Specify) ____
141655 – Du Quoin	143100 – Murphysboro	888888 – GED
141785 – Elverado	144360 – West Frankfort	Graduation Year

This is verification that my address above is the one on my driver's license, State ID, and/or my voter's registration card.

_____ _____
Signature **Date**

If attending a camp, please indicate:
Tee-Shirt Size: Child: S _____ M _____ L _____
Adult: S _____ M _____ L _____ XL _____

COURSE INFORMATION				
Course Name	Course Number	Section Number	Tuition	Fee
1.				
2.				
		Totals		

METHOD OF PAYMENT
Check payable to John A. Logan College
Money order
VISA
Discover
MasterCard

_____ _____
Card Number Expiration Date

_____ _____
Signature *(if using credit card)* Date

Insurance. John A. Logan College does not provide accident insurance for any student registered in a continuing education class. Students wanting such coverage should make arrangements with their local insurance agent.

Withdrawal/Refunds: Students in continuing education classes may withdraw and receive a full refund by contacting the Continuing Education Office prior to the second class meeting. No refunds will be given after the second class meeting.