



VCU Office of Continuing and Professional Education

Registration Form for Noncredit Courses/Events

Name (Check box if change of name)

Last	First	Middle
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Date of birth

m	m	/	d	d	/	y	y
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Gender

- Female
 Male

Permanent mailing address (Check box if change of address)

Street		
City	State	ZIP

Email address

Telephone number

Home
Work

Employer (if employed)

Agency name
Job Title

Race/ethnicity

1. Are you Hispanic or Latino? Yes No
2. In addition, select one or more of the following categories to describe yourself:

- White
 Black or African American
 Asian
 American Indian or Alaska Native
 Native Hawaiian or Other Pacific Islander

Please check "yes" or "no" for each statement below.

- Have you attended VCU in the past? Yes No
Do you currently hold a college degree (bachelor's or higher)? Yes No

Where did you hear about the Office of Continuing and Professional Education? _____

Sample

Course Code	Course Title	Course Date(s)
15-EW-001	Paralegal Certificate Program	9/2/15-12/9/15

Failure to complete all sections of this form may delay or prevent processing of your registration request. By completing this form, you are registering for a noncredit event. The registration will be processed upon receipt. Visit VCU OCPE at ocpe.vcu.edu for course, registration and general information. All registrants must abide by VCU policies found at vcu.edu

Signature: _____ Date: _____

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