

## Customized Contract Training

**Montgomery College welcomes your participation in this customized training course. As a State institution, we use the information on this form to create and maintain your official transcript, a valuable career asset. Your name and information will be stored in our secured student database.**

**Student information is not sold to commercial organizations.**

College ID Number:	<div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div> <div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; line-height: 20px;">2</div> <div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></div>	Birthdate <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> - <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> - <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div>	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
	<div style="display: flex; justify-content: space-around; font-size: 0.8em;"> <span>Month</span> <span>Day</span> <span>Year</span> </div>		
	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>
Last Name	First Name	Middle Initial	
Address	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>		<div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div>
House # and Street Name (Do NOT use P.O. Box or you will be charged Non-Md. resident fee.)			Apt. #
City	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	State <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div>	Zip <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> - <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div>
Home Phone	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	Work Phone <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div> <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black;"></div>	
Fax	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	E-Mail	
Have you attended MC before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
How did you hear about us? <input type="checkbox"/> Received brochure in mail <input type="checkbox"/> Website <input type="checkbox"/> Social media <input type="checkbox"/> Advertisement <input type="checkbox"/> On campus <input type="checkbox"/> Other _____			

**Military:** If the military is paying for your course(s), you must submit the last 4 digits of your SSN.

**STUDENTS WITH DISABILITIES**

If you need support services due to a disability, call Workforce Development & Continuing Education at 240-567-4118 at least three weeks before class begins.

**ETHNICITY:** Choose one. *(Disclosure not mandatory by Montgomery College, but is required by the U.S. Department of Education.)*

☐ Not Hispanic or Latino      ☒ Hispanic or Latino

**RACE:** Choose all that apply, you may choose more than one. (Disclosure not mandatory by Montgomery College, but is required by the U.S. Department of Education.)

☐ American Indian or Alaskan Native    ☐ Asian    ☐ Black or African American    ☐ Native Hawaiian and other Pacific Islander    ☐ White

☐ U.S. Citizen   ☐ Permanent Resident **(Circle one: Green Card / Working Card)**   ☐ Other Immigration Status (Used for tuition-setting purposes only.)

**CHECK ALL THAT APPLY:**

☐ I have been a Maryland resident [as defined in the *Montgomery College Catalog*] for at least three months.

☐ I am 60 years of age or older. (Applicable to designated tuition waiver courses for Maryland residents only.)

☐ I am a Maryland National Guard member enlisted for at least a 24 month period and submitting proof of such from the adjutant general's office.

		<b>ALL CLASSES MEET AT THE GAITHERSBURG TRAINING CENTER ROOM 440 – 441</b>	
<b>CRN #</b>	<b>Course #</b>	<b>Course Title</b>	<b>Start Date –End Date</b>
<b>44723</b>	<b>APG007</b>	<b>Cyber Security Bootcamp – Meets M-F (9:00am – 5:00pm)</b>	<b>7/4/18-7/15/18</b>

For third party tuition: I authorize the release of addresses, grades, and attendance reports to my sponsor or employer. I certify that the information on this registration is correct and complete.

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Student Signature Required

Date \_\_\_\_\_

For Office Use Only

Received Date:	Code ZZ	Company	Contract Code
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