ARTCENTER.EDU/TEACHERS

SUMMER INSTITUTE FOR TEACHERS

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2014

Registration Form

Please complete the registration form below, including your signature. Attach a check or money order in the exact amount payable to Art Center College of Design or supply the necessary credit card information, including signature, on the form. Cash cannot be accepted. Registration will be confirmed by mail. If you are applying for a scholarship, please refer to the scholarship guidelines.

Paying by Credit Card

Fax your registration form to: 626.396.4219 Please call to confirm receipt: 626.396.2319

Registering by Mail

Send completed form & payment to: Design-Based Learning Lab Art Center College of Design P.O. Box 7197 Pasadena, CA 91109-7197

Registering in Person

Submit completed form & payment to: Design-Based Learning Lab Administrative Office 950 South Raymond Ave. Pasadena, CA 91105 M-T: 10 am-9 pm / F: 10 am-5 pm

Last name	First				Middle			
Address					City			
State ZIP	Daytime phone				Evening phone			
Email	Social security number				Birth date			
Person to contact in an emergency					Phone			
Grade level(s)	Subject area(s)							
School name					Years of teaching experience			
School address					School district			
School principal					School phone			
Information Male Female Courses (check all that apply)	Are you Hispanic or Latino? Yes No Scholarship Applicant Scholarship covers tuition only. Unit credit is \$180 and scholarship recipient's responsibilty.		4 Semester Units \$680 Non Teacher Pair 4 Semester Units Non				Asian der White -002-01 -Credit \$500 -Credit 0 per teacher	
	Name of other teacher(s)			Total enclosed				
Payment	Check enclosed	Master	rCard	Visa	Discov	/er	Ameri	can Express
Credit card number		Expiration date			Security code			
Name on card	Billing address (as shown on credit card statement)							
City As a student of Art Center, I as	State gree to abide by all polic	ZIP ies and reg	ulations	of the College.	Cardholder s	ignature		

Signature