



Center for Continuing Studies

1200 Old Trenton Road, West Windsor, New Jersey 08550
Phone: 609-570-3311 Fax: 609-570-3883 Email: ComEd@mccc.edu

Employer Sponsor Information Form

STUDENT INFORMATION

Student ID # (if known) _____ Birth Date (Required) _____ Sex M F
Last Name _____ First _____ MI _____
Street Address _____
City _____ State _____ Zip _____
Phone Number (Home) _____ Phone Number (Cell) _____
Phone Number (Work) _____ Email _____

I understand if I do not provide an email, I will not receive notifications regarding course changes.

Electronic Signature Consent: I authorize MCCC to release attendance grade information to the below named employer.

By checking here, you are consenting to the use of your electronic signature in lieu of an original signature on paper.

COURSE SECTION INFORMATION

Reference #	Title	Dates	Day of Week	Time	Cost
Total					

Refunds policy: 100% if requested before the 10th day prior to the start of the course section. No refunds after that time.

I have read and understand the refund policy of The Center for Continuing Studies

PAYMENT INFORMATION

Credit Card Type: _____ Credit Card # _____ Exp Date _____ CVV # _____
Card Holder Name _____ Amount to be Charged _____
Card Holder Address _____
City _____ State _____ Zip _____
If Paying by Check, (payable to MCCC) Check # _____
Paying by PO Purchase Order Number _____

EMPLOYER INFORMATION

Name Company/Organization _____
authorizes MCCC to register the student listed for the continuing studies classes listed above and will take responsibility for payment and fees. ***Please reimburse your employees directly for the books purchased from the bookstore.**
Manager's Name _____ Title _____
Phone # _____ Fax # _____
Email Address _____
Mailing Address _____
City _____ State _____ Zip _____
Billing Department Contact _____
Phone # _____ Fax # _____
Email Address _____
Mailing Address _____
City _____ State _____ Zip _____

Electronic Signature Consent:

By checking here, you are consenting to the use of your electronic signature in lieu of an original signature on paper.