



# Application • Registration Form

## Professional Development Workshops

**PLEASE COMPLETE THIS FORM AND MAIL OR FAX IT TO:**

**Center for Professional Development**

Malone College  
515 25<sup>th</sup> Street NW  
Canton, Ohio 44709  
(330) 471-8593 or 1-800-257-4723 ext. 8593  
Fax: 330-471-8343  
email: nvarian@malone.edu

**Application**

Name \_\_\_\_\_ Gender:  Female  Male  
(First) (MI) (Last)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

e-mail \_\_\_\_\_

Birth Date \_\_\_\_\_ Social Security # \_\_\_\_\_

Highest Degree Earned \_\_\_\_\_ County \_\_\_\_\_

Last College Attended \_\_\_\_\_ Place of Employment \_\_\_\_\_

**CHECK ONE:**  I am a degree-seeking student.  I am not presently seeking a degree.  
*(Non-degree students should consult the graduate catalog for information to become a degree-seeking student)*

Have you ever taken a graduate course or workshop at Malone before?  Yes  No

Have you previously attended Malone College using a different name?  Yes  No If Yes, list name(s) \_\_\_\_\_

**Workshop(s) I am registering for:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Workshop Tuition:** \$145.00 per graduate credit hour

Enclosed is a check (payable to Malone College) for: \$ \_\_\_\_\_

Charge \$ \_\_\_\_\_ to Visa, MasterCard, American Express, or Discover (circle one)

Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Sec. Code \_\_\_\_\_

Name on Card (Print) \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

House # or PO Box # \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_

**STATEMENT OF COMPLIANCE AND RESPECT**

*Upon admittance to Malone College, I agree to comply with the rules and regulations and shall respect Malone's standards while enrolled as a student. I recognize that these standards involve good citizenship, personal honor, regard for the rights of others, and respect for daily constituted leadership. I certify that all information provided is true and complete.*

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

(OFFICE USE ONLY)

ID# \_\_\_\_\_



Date Entered \_\_\_\_\_