



1) \_\_\_\_\_ Location \_\_\_\_\_ Date \_\_\_\_\_  
Attended \_\_\_\_\_  
(Name of School)

(2 \_\_\_\_\_ Location \_\_\_\_\_ Date Attended \_\_\_\_\_

Date you anticipate beginning our program, give us a month and year: \_\_\_\_\_

How will this course be paid?    Cash    Bank Financing    School Payment Plan    Other

I hereby certify that all of the information I have listed is true & correct to the best of my knowledge.

Student/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*These questions are optional and are for informational purposes only. They will not affect your application.

\_\_\_\_\_

(This section for school use only!

Accepted: Yes / No    Date: \_\_\_\_\_    By: \_\_\_\_\_

Other comments: