World Learning
SIT Graduate Institute

SIT Language and Culture Department
Kipling Road, PO Box 676, Brattleboro, VT 05302-0676
Tel 802-258-3344 Toll-free 877-257-7751
Email lcd@sit.edu Fax 802-258-3248

# REGISTRATION FORM

## Program Information

Please register me for:

Session/Year:

| Course # | Course description | Meeting Time | Credit | Tuition |
|---|---|---|---|---|
| _____ | _____ | _____ | ❑ | _____ |
| _____ | _____ | _____ | ❑ | _____ |

*Full payment of tuition must accompany registration.* Total Amount Due _____

## Educational Background

Indicate academic institutions you are currently attending.
(Please indicate if your transcripts are in a different name from your SIT application.)

**School** _____
(school name, city & state or country)

## Personal Information

**Name (as it appears on your passport, if you have one)**

_____
last/family first/given middle/second

**Preferred Name if Different**

_____
last/family first/given middle/second

**Permanent Address**

**US Address**

_____
_____
_____
_____
City_____ State ___ Zip_____

**Non-US Address**

_____
_____
_____
_____
Country_____

Home Phone (include city and country codes): _____

Work Phone (include city and country codes): _____

Email: _____

Gender: ❑ Male ❑ Female Date of Birth: _____/_____/_____
Month Day Year

Social Security Number: _____

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## Payment Information

**Billing Name**: _____

**Billing Address**

**US Address**

_____
_____
_____
_____

**Non-US Address**

_____
_____
_____
_____

City_____ State ___ Zip_____ Country_____

Billing Home Phone: _____

Billing Business Phone: _____

Billing Email: _____

Make checks payable to World Learning. Complete the information below for credit card payments:

Circle One:

Mastercard Visa Expiration date: _____ 3 digit security code _____

Credit card number: _____

Name on card (please print): _____

Signature: _____

Return completed registration form with payment to:

Language and Culture Department
World Learning/SIT Graduate Institute
PO Box 676
Kipling Road
Brattleboro, VT 05302-0676

Credits earned from SIT are transferable only at the discretion of the receiving school.

If you are receiving full or partial financial sponsorship, including but not limited to financial sponsorship by a parent, foundation or other agency or individual, you understand and agree that your evaluation and/or grad and other information concerning your participation in the program may be released by SIT to and/or discussed by SIT with such sponsoring agency or individual.

Please sign _____ Date _____/_____/_____
Month Day Year