



PROVIDENCE
COLLEGE

School of Continuing Education
CERTIFICATE OF RELIGIOUS EDUCATION (C.O.R.E.)

REGISTRATION FORM

To register by mail, complete and return entire page with payment.
To register by fax, complete form, include payment by VISA or
MASTERCARD, sign and fax entire page to 401-865-1723.

BANNER ID:for office use only

DATE OF BIRTH:

NAME: LAST FIRST MI SSN(tax purposes) decline to provide

ADDRESS: STREET NO. CITY/TOWN STATE ZIP CODE

TELEPHONE: HOME CELL BUSINESS

E-MAIL :(MUST BE THE ADDRESS THROUGH WHICH YOU WILL COMPLETE COURSEWORK)

EMPLOYER NAME:

SCHOOL/PARISH: CONTACT PERSON NAME TELEPHONE NO.

SCHOOL/PARISH ADDRESS: STREET NO. CITY/TOWN STATE ZIP CODE

PROGRAM: CHECK ONE Administration Teacher Catechist

PLEASE FILL IN THE COURSE INFORMATION USING THE FOLLOWING EXAMPLE:

DEPARTMENT	COURSE NUMBER	CRN	COURSE CHARGE
<i>example: REL</i>	<i>001</i>	<i>2439</i>	<i>\$100</i>

PAYMENT FORM: PROVIDENCE COLLEGE SCHOOL OF CONTINUING EDUCATION Certificate of Religious Education (C.O. R.E.)

NAME: LAST FIRST MI BID

METHOD OF PAYMENT (circle one) PAYMENT IN FULL WITH ENCLOSED CHECK CREDIT CARD

TOTAL REGISTRATION CHARGE
\$

VISA OR MASTERCARD Card No. Exp Date CARD ID CODE SIGNATURE DATE

MAKE CHECKS PAYABLE TO Providence College/SCE
MAIL TO PROVIDENCE COLLEGE, SCE HARKINS HALL 109, ONE CUNNINGHAM SQUARE PROVIDENCE, RI 02918

Providence College is in compliance with section 504 of the Rehabilitation Act of 1973 and the American with Disabilities Act of 1991. If you have any needs as covered by this legislation, please notify the School of Continuing Education office at 401-865-2487