

Non-Credit Professional Course Registration

Office of Continuing Education - Extended Campus

300 Senior Hall

Cheney, Wa 99004-2442

Phone: (509) 359-7380 1-800-351-9959

FAX: (509) 359-2220

http://ewu.edu/ce



Today's Date: _____ Quarter: _____

Last Name First Name Middle Name Previous Name

Mailing Address City State Zip Code

Email Address (Mandatory to sign into CANVAS) Daytime Phone Number Home Phone Number

EWU Student ID Number Date of Birth (Required)

Do you have any Special Needs? Please specify: _____

Gender: Male Female | Are you a resident of Washington? Yes No

Have you previously earned credit through EWU? Yes No | If yes, when: Quarter _____ Year _____

Required: What race do you consider yourself? (Check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> White/Caucasian (800) | <input type="checkbox"/> Black/African American (870) | <input type="checkbox"/> Chinese (605) |
| <input type="checkbox"/> Eskimo (935) | <input type="checkbox"/> Aleut (941) | <input type="checkbox"/> American Indian (597) <small>Name of Principal or enrolled tribe:</small> |
| <input type="checkbox"/> Korean (612) | <input type="checkbox"/> Filipino (608) | <input type="checkbox"/> Vietnamese (619) |
| <input type="checkbox"/> Asian Indian (600) | <input type="checkbox"/> Guamanian (660) | <input type="checkbox"/> Samoan (655) |
| <input type="checkbox"/> Hawaiian (653) | <input type="checkbox"/> Japanese (611) | <input type="checkbox"/> Other Asian or Pacific Islander: |

Are you of Spanish/Hispanic origin? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> No, Not of Spanish/Hispanic (999) | <input type="checkbox"/> Yes. Cuban (709) |
| <input type="checkbox"/> Yes. Chicano/Chicana (705) | <input type="checkbox"/> Yes. Puerto Rican (727) |
| <input type="checkbox"/> Yes. Mexican/Mexican American (722) | <input type="checkbox"/> Yes. Other Spanish/Hispanic: _____ <small>(Specify one group, for example Columbian, etc)</small> |
| <input type="checkbox"/> Other Race: Specify | |

Course Information:

PDU CEU CE Clockhours Course Title: _____
Event Date(s): _____ Location: _____

For Office Use ONLY:
Credited to Participant

Amount: _____ Authorized Signature: _____
 Visa Mastercard Check (payable to EWU)
Account Number _____ Exp. Date _____

Eligible taxpayers may claim a tax credit on EWU courses. For more detailed information, please refer to IRS Publication 3064. "Notice 97-60 Education Tax Incentive." For purposes of the new Hope and Lifelong Learning tax credits. Federal Law (Section 6109 of the Internal Revenue Code) requires the University to obtain your Social Security Number. Thank you for your cooperation.