



CONCORD UNIVERSITY EXTENDED LEARNING PROGRAM



Professional Development Course Registration Form

Professional Development courses do not count as credit towards undergraduate or graduate degrees at Concord University. Credits granted are considered non-degree graduate credits. These courses are graded as Pass (P) or Fail (F).

If you have been assigned a Concord University identification number, please enter it here: 774-

NAME: (Please Print)		SOCIAL SECURITY NUMBER:	
(Last*)	(First)	(Middle)	
<i>*If you already have a record with CU under a different last name, please provide a legal copy of name change (i.e. marriage certificate)</i>			
MAILING ADDRESS:			
(Street or P.O. Box)		(City)	(State) (Zip Code)
		MAIN	ALTERNATE
BIRTH DATE:	Mo Day Yr	TELEPHONE	TELEPHONE:
		() (area code)	() (area code)
GENDER:	<input type="checkbox"/> Male <input type="checkbox"/> Female	EMAIL ADDRESS:	

CERTIFICATION:	CITIZEN STATUS:	ETHNIC GROUP: (Required for Federal Reporting)
Are you a certified teacher within the state of West Virginia? ____ YES ____ NO*	____ U.S. Citizen (01) ____ Permanent Resident with Alien Card (02) (Please enclose copy of both sides of card) ____ Refugee (03) ____ *Non-Immigrant/Other Visa Type (04) ____ *(Additional materials may be needed) Type _____ Birth Nation _____ Legal Nation _____	____ White, Non-Hispanic (01) ____ African American (02) ____ Hispanic (03) ____ Asian, Pacific Islander (04) ____ American Indian/ Alaskan Native (05) ____ Black, Non-Hispanic (06)
<i>*For directions on requesting an official transcript reflecting earned credits from Professional Development courses, please refer to the next page.</i>		

EDUCATION INFORMATION: List all colleges and universities you have attended.				
<small>(Must have obtained a BA or BS to enroll)</small>				
College or University	City & State	Dates Attended (MM/YYYY) to (MM/YYYY)	Graduation Date (MM/YYYY)	Degree Obtained (MS, BA, BS)

REGISTRATION INFORMATION: (Please list each course separately)			
Course Title (Required)	Course Number (CRN)	Section Number	Course Date(s)/Semester: (MM/DD/YYYY) to (MM/DD/YYYY)
1) SHAPE WV Spring 2024	20701	32F	Spring 2024
2)			
3)			

I understand that all information is required and that any missing information will delay the processing of my application. I affirm that the information I have provided on this application form is accurate and true. Providing false information will lead to removal from the course(s). In order to receive non-graduate credit, a registration form for Professional Development Courses must be completed and submitted to our office before the end date of the course term set by WVDE.

SIGNATURE: _____ **DATE:** _____

Applicant Name: (Last, First) _____

CONCORD UNIVERSITY EXTENDED LEARNING PROGRAM
Non-degree graduate credit is \$33/1 hour* (Non-refundable)

PAYMENT BY CREDIT OR DEBIT CARD :

I wish to pay by:

Credit Card

Debit Card

VISA

MASTERCARD

DISCOVER

Cardholder's Signature

Card Number

Expiration Date

CCV

Charge Amount

Billing Zip Code

PAYMENT BY CHECK:

Make check payable to: *CU Research & Development Corp.*

SUBMIT REGISTRATION FORM AND PAYMENT TO:

econner@concord.edu

OR

CU Extended Learning
Attn: Dr. David Campbell
P.O. Box 1000
Campus Box F-30
Athens, WV 24712

OR

Fax: 304-913-6099

OFFICIAL TRANSCRIPTS:

***Official transcripts are NOT included in the \$33/credit hour fee.**

If you choose to request an official transcript for licensure, certification, or permit renewal with the WVDE - electronic transcripts are available through The National Student Clearinghouse at:



www.getmytranscript.org

All others requesting official transcripts need to email CU Registrar's office at registrar@concord.edu or call 304-384-5237.

Transcripts reflecting these credits will become available beginning May 12, 2024

Questions concerning CU non-degree, graduate credit? Contact:

Erin Conner, Program Assistant - 304-384-5130 or econner@concord.edu

Dr. David Campbell, Program Coordinator - 304-384-5331 or dcampbell@concord.edu

Fax: 304-913-6099