

**Southern Wesleyan University
Project Read Registration Form
Summer 2014**

Full Name: _____ SSN _____

Home Address: _____

Work Phone: () _____ Home Phone: () _____

Email Address: _____

Religious Affiliation: (Optional) _____ Grade Level You Teach: _____

School: _____ County: _____ School District: _____

Date of Birth: ____ / ____ / ____ Race: _____ Gender: _____

Are you in the Master of Education Program at SWU? _____ If so, cohort number _____

List any Project Read Courses you have previously completed: _____

SWU ID# _____

Check the course(s) for which you are registering:

Charleston Site - July 7-11, 2014 (8:30am – 4:00pm)

- EDUC 5853 Word Function in Sentence Structure and Paragraph Development
(Written Expression) (grades K-5 teachers only) Class enrollment limit: (20)**

Central Site - July 21-25, 2014 (8:30am – 4:00pm)

- EDUC 5833 Structure and Format of Language for the Elementary Teacher
(Reading Comprehension) (grades K-5 teachers only) Class enrollment limit: (25)**

Date

Applicant's Signature

Please mail this completed registration form, a copy of your current South Carolina teaching certificate, and your non-refundable check for \$50.00 for each course made payable to Southern Wesleyan University to

Ms. Betty Hayes
Project Read Secretary
Southern Wesleyan University
P. O. Box 1020
Central, SC 29630
(864) 644-5343
1-800-289-1292, Ext. 5343
bhayes@swu.edu

Upon receipt of the above items, you will be mailed notification of your official enrollment and additional information for the course.