

# SOUTHERN WESLEYAN UNIVERSITY

## Project Read® Registration Form

The information requested on this form is required for reporting purposes to the state and federal governments. Please complete optional fields that are marked with an asterisk (\*) at your discretion.

Full Name \_\_\_\_\_ SS# \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Race\* \_\_\_\_\_ Gender \_\_\_\_\_

Religious Affiliation\* \_\_\_\_\_

School \_\_\_\_\_ County \_\_\_\_\_

Circle the grade that you teach below:

Classroom K 1 2 3 4 5

Special Needs K 1 2 3 4 5

Are you a currently enrolled or have you ever taken classes at Southern Wesleyan University? \_\_\_\_\_

Indicate the course for which you are registering and whether you are auditing or plan to receive Graduate Course Credit.

Audit    Grad Credit

EDUC 5833 – Structure and Format of Language for the Elementary Classroom  
(Reading Comprehension) – **Location: Southern Wesleyan Main Campus**  
**First Class Meeting: Monday, September 21, 2015**  
**Last Class Meeting: Monday, October 26, 2015**

I understand that in order to receive credit for this course my registration form and payment must be received by Southern Wesleyan University no later than the first day of class.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If you have questions please contact Dr. Hawanya Amaker at [hamaker@swu.edu](mailto:hamaker@swu.edu) or (864)644-5343.

**Please mail registration form, a copy of your teaching certificate, and a check for \$50.00 made payable to Southern Wesleyan University to the address below.**

Southern Wesleyan University  
Dr. Hawanya Amaker, Project Read Coordinator  
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Central, SC 29630