

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 5853 – Word Function in Sentence Structure and Paragraph Development for the Elementary Classroom – (Written Expression)

Location: Stile Point Elementary Room 229, 881 Mikell Drive, Charleston, SC 29412

Start Date: Tuesday, September 15, 2015

The class will meet on September 15, 22, 29, October 3, 13, and 20.

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 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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SWU Box 1815
Central, SC 29630