

# **ADULT PERSONAL ENRICHMENT PROGRAMS**Spring 2018

**REGISTRATION INFORMATION** Register Early! Classes are cancelled for under enrollment several days in advance. We recommend that you register at least ONE week in advance of the course start date. Many of our classes have limited enrollment and fill quickly. Sign up early to insure a place in the course of your choice.

Registration includes full payment along with fully completed Registration Form.

#### IN-PFRSON

Our office is located on the first floor of Somerset Hall, Room S147. Register Monday through Friday from 8:30 am to 4:00 pm.

## **ON-LINE REGISTRATION**

www.raritanval.edu/ce

#### MAIL

Complete the registration form and mail it with a check or money order made payable to RVC College to:

RVCC – College Advancement

P.O. Box 3300, Somerville, NJ 08876

### Registrations cannot be done by phone.

View our courses: www.raritanval.edu/ce

Phone: 908-526-1200, Ext. 8404 E-mail: communityed@raritanval.edu

#### **COURSE CONFIRMATION & LOCATION**

Approximately 5 days before the start of your course, a confirmation notice is emailed containing all necessary information. If you have not received the confirmation regarding your course within 2 business days of the course starting date, please call 908-526-1200, Ext. 8404. There are no refunds because you did not receive confirmation.

#### **CANCELLATION & REFUND POLICY**

The Youth Program operates on a self-supporting budget based on tuition income. We are pleased to offer you a refund for your course provided you adhere to the following refund policy and process. We regret that there can be no exceptions to the following cancellation policy due to an individual's personal or professional circumstances. If the College cancels a course prior to the first class, registrants receive the entire tuition and fees refunded. Please allow 4 to 6 weeks for processing and mailing of your refund. No refund can be provided for cancellation/withdrawal by the student without written notification at least ten (10) business days prior to the start date of the course. Registrants canceling their enrollment in writing ten (10) or more business days in writing before the beginning of a course receive a full refund less a non-refundable registration fee of \$15. The written request should include: student ID number, home address, home telephone number, the course name and course number or CRN. Please fax your request to 908-725-2831 or mail it to RVCC, College Advancement, PO Box 3300, Somerville, New Jersey 08876 or email to youth@raritanval.edu. The College reserves the right to limit registrations, combine like courses and to cancel courses if enrollment is insufficient. If the College cancels a course we will contact you by either telephone or email. At that time, you may choose to register for another course or have your refund processed. All refunds are sent by mail to the student.

#### **DISABILITY ACCOMMODATIONS**

If your child has a disability and you have questions or want to request accommodations, please contact the Coordinator of Disabilities Services. The College provides services in accordance with federal legislative guidelines and RVCC Policies and Procedures. Reasonable accommodations are approved on a case-by-case basis. We request that documentation of disability and request for accommodations be presented at least three weeks prior to the beginning of classes.

We offer the option of providing some programs off site. In addition to the convenience of offsite programs, this option allows you the freedom to tailor any of our programs to your individual needs.

1 www.raritanval.edu/community | communityed@raritanval.edu | 908-526-1200 x 8404

WE RECOMMEND THAT YOU REGISTER AT LEAST ONE WEEK IN ADVANCE OF THE COURSE START DATE.



# Raritan Valley Community College PERSONAL ENRICHMENT

Phone: (908) 526-1200, X 8404

Fax: (908) 725-2831

#### **REGISTRATION FORM**

rst Name:		Middle La	st Name:		
ome Address:				County:	
ty:		State, Zip Code:			
nte of Birth:		Home Phone: (	)		
ll Phone:	( )	Work Phone: (	)		
ail Address:				Female	Male
hnic Educa		<b>Educational Goal</b>		Completed Educational Level:	
African-American		☐ Obtain Certificate		☐ High School	
Asian		☐ Job Advancement		<ul><li>Associates Degree</li></ul>	
Caucasian		☐ Maintain Licensure		☐ Bachelor Degree	
] Hispanic/Latino		☐ Personal Development		☐ Masters Degree	
Other				Doctorate Degr	ee
RN Cou	ırse Title			Start Date	Fee
					\$
					\$
					\$
					\$
					\$
				TOTAL FEE	\$
yment Optior	ns for Workforce Devel	opment course fees:			
Register onl	ine <u>www.raritanval.edu</u> ,	/workforce - We accept VISA, MasterCard	d & Discove	er (no AMEX)	
Cash, Amou	nt <u>\$</u>				
		Date:		Amount: \$	

#### **REFUND POLICY**

A student enrolled in a course section that is cancelled by the College is given the opportunity to enroll in an alternate course section or to receive a full refund of all tuition, registration fees, and material fees associated with the cancelled course section.

A student who withdraws from a course section during the refund period receives a 100% refund of all tuition and material fees associated with the course. *The registration fee is not refunded*. After the refund period, no tuition or fees shall be refunded. The refund period is 5 or more business days prior to the start of the first class date. *ALL CANCELLATION REQUEST MUST BE RECEIVED IN WRITING*. You may email your cancellation request to communityed@raritanval.edu.