Application for Non-Credit Course

Trenholm Campus
Post Office Box 10048
Montgomery, AL 36108
(334) 420-4240
www.trenholmstate.edu

TrenholmState
H. Councill Trenholm State Technical College

Patterson Campus
Post Office Box 10048
Montgomery, AL 36116
(334) 420-4240
www.trenholmstate.edu

Date:	Social Security Number:	Date of Birth:

Ethnic Origin : ☐ White/Caucasian ☐ Black/African American ☐ Asian/Pacific Islander ☐ Hispanic ☐ American Indian/ Alaskan Native ☐ Other ☐ Prefer not to respond

Education Level: ☐ GED ☐ High School Diploma ☐ College

Gender: ☐ Male ☐ Female

Name: Last First Middle Maiden

Address:

City	State	Zip	County

Phone:
Day _____
Evening _____
Cell _____

Fax Number: _____
Email Address: _____

PERSON TO CONTACT IN CASE OF EMERGENCY

Name: _____ **Phone:** _____

PAYMENT METHOD

Enclosed is a check for $_____ made payable to Trenholm State Technical College

Bill Company via P.O. #_____ (copy required) Company_____

☐ Visa ☐ Master Card ☐ WIA Qualified ☐ Student Loan ☐ Cash **(Do not mail cash)**

Credit Card #_____ Exp. Date _____/_____

Name on Card_____
(please print)

COURSE TITLE	DATE	FEE

Total: $ 0.00