Mail registration form and payment to:
RUTGERS CENTER FOR GOVERNMENT SERVICES
303 George Street, Suite 604
New Brunswick, NJ 08901-2020

Or fax to: 732-932-3586

GENERAL INFORMATION

If home or employer information has changed since your last registration, check here. ☐

Last Name ________________________________________________
First Name ____________________________ Middle Initial _______

Gender  ☐ Female  ☐ Male

Employer ____________________________________________

Title ___________________________________________________

Business Address

Street _________________________________________________

City ___________________________________________________________________

State ___________________________ ZIP ______________

Home Address

Street _________________________________________________

City ___________________________________________________________________

State ___________________________ ZIP ______________

Phone Numbers (required – check box for preferred)

☐ Mobile__________________ ☐ Home _______________________

☐ Business__________________ Ext. _______________________

E-mail Addresses (required – check box for preferred)

☐ Business______________________________________________

☐ Home ________________________________________________

COURSE INFORMATION

I wish to register for:

Title ___________________________________________________

Code _______________________ Fee __________________

Location ________________________________________________

Title ___________________________________________________

Code _______________________ Fee __________________

Location ________________________________________________

Title ___________________________________________________

Code _______________________ Fee __________________

Location ________________________________________________

Title ___________________________________________________

Code _______________________ Fee __________________

Location ________________________________________________

Title ___________________________________________________

Code _______________________ Fee __________________

Location ________________________________________________

Title ___________________________________________________

Code _______________________ Fee __________________

Location ________________________________________________

Prerequisite(s) (if applicable) ____________________________

Completion Date ______________ Location ______________

PAYMENT INFORMATION

Check or voucher must accompany registration form. Make check or voucher payable to: Rutgers, The State University of New Jersey. Mail to above address.

In accordance with University policies, credit card information is no longer accepted on registration forms. Students paying course fees with a credit card must register online at: http://cgs.rutgers.edu. Click on the red “Register Now” button.

There is a $25 fee for course withdrawals and/or returned checks.