

**CENTENARY COLLEGE**

400 Jefferson Street  
 Hackettstown, NJ 07840  
 Phone (908) 852-1400 x 2073

**GRADUATE PROGRAM REGISTRATION FORM****FALL SEMESTER 2009****Aug. 26 – Dec. 14, 2009****FALL 2009***Faxed forms will not be accepted.*

**Name:** \_\_\_\_\_  
 (Last) (First) (MI) (Miss, Mrs., Mr.)

\_\_\_\_\_  
 Graduate Division Approval Signature

**Address:** \_\_\_\_\_  
 (Street) (City) (State) (Zip)

**Degree Sought** \_\_\_\_\_

**Telephone:** Home: ( ) \_\_\_\_\_ Business: ( ) \_\_\_\_\_

**Centenary ID#** \_\_\_\_\_

Course #	Type	Section	Day /Time	Course Title	Credits	Tuition
					X \$705	
					X \$705	
					X \$705	

Are you a previous Centenary student? Yes \_\_\_ No \_\_\_

Are you a Centenary College employee? Yes \_\_\_ No \_\_\_

**Payment Options:**

1. New students deposit \$150, returning students deposit \$50 per course, balance due 8/12/09.
2. Total due with registration form.
3. Installment Plan: Minimum payment 50% plus \$15 installment fee with registration form. Balance due 10/16/09.  
A late payment fee will be charged, up to a max of \$45, if not paid on time. Collection costs of 30% or more may be added to recover any balance unpaid at the end of the semester.
4. A direct billing: applicable only if employer makes direct payment to College prior to receiving grades. (Employee Voucher required at time of registration)
5. Deferred Payment: Employer Re-imbusement.

Organization: \_\_\_\_\_

Billing Address: \_\_\_\_\_

<b>Total</b>	\$
<b>Installment Plan Fee -\$15</b>	\$
<b>Installment Total</b>	\$
<b>Amount Enclosed Installment Plan</b>	\$
<b>Balance Due on Installment Plan – 10/16/09</b>	\$
<b>Amount Enclosed</b>	\$
<b>Deposit Enclosed - \$50 per course</b>	\$

**Payment Method:** Check # \_\_\_\_\_ Credit Card: To pay by credit card, complete a separate credit card authorization form or go to [www.centenarycollege.edu](http://www.centenarycollege.edu), under the words **Students and Parents** click on **Make Payments**, click on online payment link. **If payment is not received within 72 hours, registration will be cancelled.**

**Mail to: Centenary College, Registrar's Office, 400 Jefferson Street, Hackettstown, NJ 07840**

**Tuition Refund Schedule:** Tuition refunds will be made in accordance with the following schedule and only after the student notifies the Registrar's Office in writing on an Add/Drop form of their intent to withdraw from a class. The date the notification is received by the Registrar's Office will be used to determine the refund, whether or not the student has attended the class. Graduate Program students receiving Financial Aid funds must call the Financial Aid Office (ext. 2350) before withdrawing or dropping below 6 credits.

**Withdrawal: Before the first day of the session: 8/25/09=100% FALL 2009: 8/26 – 9/01/09=75%, 9/02 – 9/08/09=50%, 9/09 – 9/15/09 = 25%. After 9/15/2009 No Refunds**

I have read and agree to abide by the College policies stated on this registration form and in the College Catalog.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note:** If you wish to revise or cancel your registration, an Add/Drop Form (found in the Registrar's Office) must be sent to the Registrar's Office. It is to your advantage to register early to prevent being closed out of classes.