

Center for Workforce Education

Student Information Sheet

Name :	First	MI		Last		Date of Birth:
Street Address						
Address						
City			State		Zip co	de
Home Phone Work		Work Phone	Phone		Cell Phone	
Email Address						
Employer:						
Course Registration Information:						
Location	Course Name			Beginning	Date	Course Fee
	Heavy Equipment Operator					
Fast Track Career Programs Only:						
Valid Photo ID required for all Career Programs at first class. Initial:						
Classes are delivered in English. Proficiency is required. Initial:						
	I acknowledge I must supply a copy of my high school diploma or GED is required for the course that I have selected. Students will not receive certificates of completion without this documentation. Initial:					
• lao	cknowledge I must have access to a personal computer with internet. Cell phones alone are not acceptable. Initial:					

Student Grade Release Form

I understand this program is sponsored ALABAMA CRAFT TRAINING BOARD and as such, I am giving permission for Jefferson State Community College to release any information to that organization and my employer related to class attendance, conduct, academic honesty and grades. In addition, I am also giving Jefferson State Community College's One Stop Career Center permission to release information about my participation in any of their services.

Student Photo Release Form

I, the undersigned, do hereby release all rights or claims in connection with the photo(s) or video in which I appear, for use by Jefferson State Community College. I understand that the photo(s) or video, if used, will be used for the promotional purpose of assisting Jefferson State Community College and I waive any claim to financial remuneration for the use of these photo(s) or video. I also waive any right to inspect or approve the finished photos and advertising copy.

I hereby release Jefferson State Community College, its legal representatives and all persons acting under its permission or authority, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in taking of said picture(s) or video or in any subsequent processing thereof, as well as any publication thereof.

I declare that I am of legal age and have every right to contract in my own name in the above regard.

Electronic Signature _____ Date ____ Date ____