



Accredited  
Member of  
ACICS



### MJI Online: Winter 2010 Classes - Ofakim

Please complete this form to participate in Michigan Jewish Institute (MJI) Winter 2010 Classes

\*Items marked with an asterisk must be completed.

#### I. Personal Information

Gender*	
Last Name*	
First Name*	
Middle Initial	
Social Security Number*	
Address*	
Address 2	
City*	
Postal Code*	
Home Phone*	
Cell Phone*	
Student Email Address*	
Host School	Ofakim



## II. Class Selection

Please confirm your class:  CIS 101

## III. Educational Plans

\* I understand this class will be included in my Program Plan. Any changes to the Program Plan are subject to review and approval by MJI. (You must check the box to register.)

## IV. Signature

REQUIRED SIGNATURE: Please sign below to complete your registration.

I recognize that this form allows me to participate in the Michigan Jewish Institute (MJI) Winter 2010 online class at no personal cost or obligation. *Textbooks are not included and are the responsibility of the student.* Upon successful completion of the class, I will have earned credits applicable to MJI or transferable by transcript to another institution (to be evaluated at their discretion).

I certify that all information on this application is complete and accurate to the best of my knowledge.

Please sign and date below:

---

Signature

---

Date