



הוראה חרדית תורנית ברשת

Darchei Rochel  
MJI Online Registration Form

Please complete this form to participate in 2010 Classes

\*Items marked with an asterisk must be completed.

**I. Personal Information**

Gender*	Female
Last Name*	
First Name*	
Middle Initial	
Social Security Number*	
Address*	
Address Two	
City*	
State*	
Postal Code*	
Home Phone*	
Cell Phone	
Student Email Address*	
Host School	Darchei Rochel

**II. Class Selection**

Please confirm your class:  JST 331

**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 HCTB. (You must enter Y in 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 HCTB 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 HCTB 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:

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Signature

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Date