



# CONCURRENT ENROLLMENT PROGRAM (CEP) REGISTRATION FORM

973.300.2223 | cep@sussex.edu

**PLEASE PRINT**

Student ID # \_\_\_\_\_

Month/Day/Year \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_

City and State \_\_\_\_\_ Zip \_\_\_\_\_ County of Legal Residence \_\_\_\_\_

Phone Number \_\_\_\_\_ Alternate Number \_\_\_\_\_

Email \_\_\_\_\_ Name of High School \_\_\_\_\_

**Semester Year** \_\_\_\_\_  
(check one)

FALL       SPRING

Have you previously taken  
Concurrent Enrollment  
courses through Sussex?

Yes       No

Check if your address has changed.      SOCIAL SECURITY NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

COURSE CODE	COURSE NUMBER	SECTION NUMBER	COURSE NAME	CREDITS
			<b>TOTAL CREDITS</b>	

**STUDENTS:** *I have read, understand, and agree to the above policies and requirements.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

High School: \_\_\_\_\_

**PARENTS:** *If student is under the age of 18, the parents must sign.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Cost per course is as follows:**

**1 credit course - \$75      2 credit course - \$150      3 credit courses - \$225      4 credit course - \$300**

**For additional questions contact  
Julie Fliegel, CEP Coordinator | cep@sussex.edu**