



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
			TOTAL CREDITS	

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**