## PRECOLLEGE PROGRAMS NONCREDIT REGISTRATION FORM

Please complete this form and mail or fax to:

Fashion Institute of Technology 227 West 27 Street, Room SR10 New York, NY 10001-5992



Fax: 212 217.7964										
GENERAL INFORMATION										
Have you ever applied to FIT for a high school or college course?				☐ YES	□ NO I	☐ SUMMER	☐ FALL	☐ SPRIN	IG	
Student ID number				Student	Student cell phone (if available)					
Name										
		LAST		FIRST			MIDDLE			
Current mailing address										
	STREET	APT. NUMBER	CITY	STATE ZIP CODE						
Telephone				Parent's	Fmail					
Totophieno						CONFIRMATION O	F REGISTRATIO	N AND BILLIN	NG PURPOSES	
Date of birth				Gender	r 🗆 Male 🔲 Female					
MONTH DAY			YEAR	dondo	ΙΙΝΙαΙΟ	- Tomaic				
School currently attending			Grade	□ 7 □	8 🗆 9 🗆	] 10 🔲 1	11 🗆 12	1		
Ethnicity (optional) You may check more than one:		□ White, Non-Hispanic □ Hispanic/Latino □ Americ   □ Black, Non-Hispanic □ Unknown □ Other				can Indian/Native Alaskan 🔲 Asian or Pacific Islander				
COURSE REGISTRATION										
Please fill in the appropriation of the second seco		mation for the	-			] 4 courses	☐ 5 co	urses [	☐ 6 courses	
Course NUMBER	Course TITLE			Section/Time	)	Fee				