

Student Intake Form



DATE

NAME

COURSE TAKING

TIME SLOT

MOBILE PHONE

E-MAIL

ADDRESS

CITY

STATE

ZIP CODE

Know someone that can benefit from Higher Learning Institutions? Leave their name and number, and YOU earn \$50.00 per referral that enrolls, and completes the course!

How did you hear about us?

Clothing Size? (Circle One)

S M L XL 2X 3X-10X

Special Requests?
