

REGISTRATION FORM

SPRING 2026

2950 East X Street La Porte, TX 77571 281-478-3900

www.onlineCMEF.org

College or CMEF Representative signature



Non-DOL Programs Only

STUDENT NAME

COURSE REGISTRATION

| Name (First, Mid | ldle Initial, Last) | | | 1st Class Request | | Level | Rep Inititials |
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| | | | | 13t Classicquest | | LCVCI | nep illiciais |
| Street Address | | | | | | | |
| City | | State | Zip Code | The class must be offerred at | referred | | hedule distributed by CMF |
| () | | | | CMEF | | San Jacinto (| |
| Cell Phone Nur | mber | | | Lee | | Jacinto Nort | |
| Email Address | | | | - | Textboo | ks | |
| | | | All classes require a textbook. Textbooks can be purchased at the CMEF Main Office. | | | | |
| Date of Birth (MM/DD/YYYY) *Social Security Number* | | | - · · · · · · · · · · · · · · · · · · · | I OYFR I | INFORMAT | TION | |
| | | Race | /Ethnicity | 21.11 | LOTERT | in Onni | 1011 |
| NCCER # | | □ Asian | | | | | |
| Gender | Veteran | | African American | Company Name | | | |
| ∃ Female | □ Yes | ☐ Hispanic | | | | | |
| □ Male | □ No | □ White | | | | | |
| | | □ Other | | Supervisor Name & Sig | nature | | |
| Name (First, La | ast) | | Relation | PATION AND BELEASE | Phone | Number | |
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