

TEAS (TEST OF ESSENTIAL ACADEMIC SKILLS) PREP WORKSHOP



If you are planning a future in nursing, the TEAS (Test of Essential Academic Skills) is an important step in the process. Prepare for the test by learning about the format of the test and strategies for the mathematics, reading, English and science portions of the test. Practice exams are included. NOTE: It is strongly recommended that only students who read at college level enroll in this workshop. A reading assessment will be given at the first class meeting.

CES 4296
Sec. 946201
Fee: \$125
Location: LA 260

Saturdays

5 Weeks
Begins September 11
8:30 am - 11:30 am
P. Schneider

CES 4296
Sec. 946216
Fee: \$125
Location: LA 260

Saturdays

5 Weeks
Begins October 2
12:00 pm - 3:00 pm
P. Schneider

*Please see
other side for
Registration
Information*



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CES 4296 Sec. 946201 Fee: \$125 Location: LA 260	Saturdays	5 Weeks Begins September 11 8:30 am - 11:30 am P. Schneider
CES 4296 Sec. 946216 Fee: \$125 Location: LA 260	Saturdays	5 Weeks Begins October 2 12:00 pm - 3:00 pm P. Schneider

Registration for Fall 2010 semester begins Monday, August 2, 2010.

To register, complete the form below and return at least one week prior to class start date.
For more information, please call Continuing Education and Professional Development at 734-462-4448
or visit our web site www.schoolcraft.edu.

Refunds are issued in accordance with college policy.

It is the policy of Schoolcraft College that no person shall, on the basis of race, color, national origin, gender, age, marital status, creed, or handicap, be excluded from participating in, be denied benefits of, or be subjected to discrimination during any program or activity or in employment.

Continuing Education and Professional Development—Fall 2010

Please use one registration form per student. Duplicate this form as needed.

Date of Birth ____/____/____ Student Number _____ **OR** SS# _____
To be assigned to first-time students.

 Last First MI/Former

 Number Street City State Zip

 Day Phone Evening Phone Cell Phone

Section No.	CES No.	Title of Course
_____	_____	_____
_____	_____	_____
_____	_____	_____

This data is optional and confidential:

- Female Male
- White Black or African American
- Hispanic or Latino Asian Other
- American Indian or Alaskan Native
- Native Hawaiian or Other Pacific Islander

AMT: \$ _____
 AMT: \$ _____
 AMT: \$ _____
 Total: \$ _____

- Enclosed is my Check/Money Order payable to Schoolcraft College
- Charge to VISA/MC/Discover No. _____ Exp. Date _____

For office use only

Signature required for charge card payment (*Refund checks are issued to students rather than charge card credits*)

Walk-in Registration - Admissions & Enrollments office, McDowell Center Building Monday & Thursday: 8:00 am - 7:00 pm Tuesday, Wednesday and Friday: 8:00 am - 4:00 pm	OR	Mail to: Schoolcraft College/Cashier: CE 18600 Haggerty Rd. Livonia, MI 48152-2696
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Company-paid Tuition: Please send a copy of your purchase order when you register.

Co. Name _____
 Co. Address _____
 Billing Contact Person _____
 PO# _____