

# R·I·T

## Undergraduate Registration Form for Project Lead The Way Students

**Registration Deadline: November 2, 2018 for students who completed a course in the 2017-2018 school year**  
**Please refer to the Student/Parent Letter on our website for additional information: [rit.edu/pltw](http://rit.edu/pltw)**

Complete all sections in INK (PLEASE PRINT) Date \_\_\_\_\_

Have you applied for RIT college credit previously  Yes  No

Student's Name \_\_\_\_\_  
Last First Middle

Social Security # \_\_\_\_\_  
(Required)

Date of Birth \_\_\_\_\_  
Mo. Day Yr.

Gender:  Female  Male

Home Address (RIT mail will be sent to this address)

Number & Street \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Email \_\_\_\_\_  
Area Code Confirmation will be emailed here

School Name \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ Expected HS Grad Date: \_\_\_\_\_

Course #	Credits	Course Title	Tuition
<input type="checkbox"/> CAST-PLTW-101 - 88	3	Introduction to Engineering Design	\$225
<input type="checkbox"/> CAST-PLTW-102 - 88	3	Principles of Engineering	\$225
<input type="checkbox"/> CAST-PLTW-103 - 88	3	Digital Electronics	\$225
<input type="checkbox"/> CAST-PLTW-104 - 88	3	Civil Engineering/Architecture	\$225
<input type="checkbox"/> CAST-PLTW-105 - 88	3	Computer Integrated Manufacturing	\$225

**Note:** A transcript will be sent to you at the end of the RIT semester in which you are registered. When you apply to colleges and need an official transcript, download the transcript request form at <http://www.rit.edu/academicaffairs/registrar/forms> and submit it to RIT's Registrar's Office.

### Tuition Payment

The \$225 per course tuition must be paid with check or money order, made payable to RIT.

Send it and completed form to:

PLTW School Relations  
Rochester Institute of Technology  
Slaughter Bldg-78, Room 2395  
137 Lomb Memorial Dr  
Rochester, NY 14623

### Optional Information

If you wish to be identified with a particular ethnic or racial group, please indicate how you would describe yourself.

**Ethnicity:** \_\_\_\_\_ Hispanic or Latino

\_\_\_\_\_ Not Hispanic or Latino

**Race** (please select one or more):

\_\_\_ Asian

\_\_\_ American Indian or Alaska Native

\_\_\_ Black or African American

\_\_\_ Native Hawaiian or other Pacific Islander

\_\_\_ White

### Registrar's Office Use Only

Program Plan: **PLTW-NON**

Date Processed: \_\_\_\_\_

Processed by: \_\_\_\_\_

Term registered: \_\_\_\_\_