

Name:



Fall Registration

(September 11th - December 22nd)

Admission to any FRA program is based upon availability

Please Check One : Interim ---- CCW ---- Supports ---- Self - Pay
Please Check Student's Tier Level : A B C D E

GOODS & SERVICES

Location	Day	AM Classes	PM Classes	Course Name	Credit Hours	Register (✓)
SHREW	MON	10AM - 12PM	-	Exploring Social Media	2	
SHREW	TUES	-	1PM - 3PM	Let's Go Surfing	2	
SHREW	WED	10AM - 12PM	-	Enjoy The Power Of PowerPoint	2	
SHREW	THURS	-	1PM - 3PM	Videography With Green Screen	2	
EATON	MON	-	1PM - 3PM	Possess The Skills Of Microsoft Publisher	2	
EATON	TUES	10AM - 12PM	-	Art Of Digital Photography	2	
EATON	WED	-	1PM - 3PM	Scratch	2	
EATON	THURS	10AM - 12PM	-	Fun With Microsoft Word	2	
EATON	FRI	-	1PM - 3PM	Enjoy The Power Of PowerPoint	2	
BRICK	MON	9AM - 11:30AM	-	Scratch (B Class)	2.5	
BRICK	MON	-	12PM - 2PM	Technology In The Home	2	
BRICK	MON	-	12PM - 2PM	Excel for Scheduling Life (B Class)	2	
BRICK	TUES	9AM - 11AM	-	Writing Essentials	2	
BRICK	WED	9AM - 11AM	-	Videography With Green Screen	2	
BRICK	THURS	9AM - 11:30AM	-	Excel for Fiancial Management (B Class)	2.5	
BRICK	THURS	-	12PM - 2PM	Possess The Skills Of Microsoft Publisher	2	
BRICK	FRI	-	12PM - 2PM	Art Of Digital Photography	2	
TOTAL						

Name:

PRE-VOCATIONAL

<u>Location</u>	<u>Day</u>	<u>AM</u> <u>Classes</u>	<u>PM</u> <u>Classes</u>	<u>Course Name</u>	<u>Credit</u> <u>Hours</u>	<u>Register</u> <u>(✓)</u>
SHREW	MON	-	12:30PM - 3PM	Exploring Employment In Visual Arts	2.5	
SHREW	TUES	10AM - 12:30PM	-	Is There A Job For Me ?	2.5	
SHREW	WED	-	12:30PM - 3PM	Communicating In The Workplace	2.5	
SHREW	THURS	10AM - 12:30PM	-	Ready For Workplace Environment	2.5	
EATON	MON	10AM - 12:30PM	-	Ready For Workplace Environment	2.5	
EATON	TUES	-	12:30PM - 3PM	Understanding Workplace Expectations & Interactions	2.5	
EATON	WED	10AM - 12:30PM	-	Is There A Job For Me ?	2.5	
EATON	THURS	-	12:30PM - 3PM	Exploring Employment In Woodworking	2.5	
EATON	FRI	10AM - 12:30PM	-	Exploring Employment In Visual Arts	2.5	
BRICK	MON	9AM - 12PM	-	<i>Romaine</i> Calm (Lunch Included)	3	
BRICK	TUES	-	11:30AM - 2PM	Is There A Job For Me ?	2.5	
BRICK	WED	-	11:30AM - 2PM	Communicating In The Workplace	2.5	
BRICK	THURS	9AM - 11:30AM	-	Ready For Workplace Environment	2.5	
BRICK	THURS	-	12PM - 2PM	Is There A Job For Me ? (B Class)	2	
BRICK	FRI	9AM - 11:30AM	-	Exploring Employment In Woodworking	2.5	

Additional Classes

<u>Location</u>	<u>Day</u>	<u>Time</u>	<u>Course Name</u>	<u>Credit</u> <u>Hours</u>	<u>Register</u> (✓)
SHREW	MON	9AM - 10AM	YOGA	1	
SHREW	MON	4:30PM - 5:30PM	DANCE WITH JAY	1	
SHREW	MON	5:45PM - 6:45PM	DANCE WITH JAY	1	
SHREW	MON	7PM - 8PM	DANCE WITH JAY	1	
SHREW	TUES	4:30PM - 5:30PM	DANCE WITH JAY	1	
SHREW	TUES	5:45PM - 6:45PM	DANCE WITH JAY	1	
SHREW	TUES	7PM - 8PM	DANCE WITH JAY	1	
SHREW	WED	4:30PM - 5:30PM	KARATE WITH JAY	1	
SHREW	WED	5:45PM - 6:45PM	KARATE WITH JAY	1	
SHREW	WED	7PM - 8PM	KARATE WITH JAY	1	
BRICK	MON	2PM - 3PM	YOGA	1	
BRICK	THURS	4:30PM - 5:30PM	DANCE WITH JAY	1	
BRICK	THURS	5:45PM - 6:45PM	DANCE WITH JAY	1	
SHREW	ALL		INDIVIDUAL COMPUTERS	1	

Name:

Personal Information

Student Full Name

Date of Birth:

Gender:

MALE FEMALE

Parent/Guardian Name:

Address:

Home & Cell Phone:

Email:

Support Coordinator:

S.C. Phone:

S.C. Email:

Budg. Start & End Date:

Emergency Contact #1:

Phone Number:

Emergency Contact #2:

Phone Number:

Participants must demonstrate the ability to accept and follow reasonable rules and to behave respectfully towards others. They must also have sufficient emotional and independent stability to participate in all aspects of the program.

Name of Participant:

Date:

A person over the age of 18 is considered their own legal guardian unless someone else has been appointed guardian by the courts. My son/daughter:

Self Guardian

Legal Guardian

Name of Guardian & Relationship:

Medical History

Cardiac: Y N Seizures: Y N Diabetic: Y N

Diagnosis: _____

Accommodations:

Allergies:

Medications and Doses:

Medical or Physical Concerns:

Fears/Concerns/Behaviors (Provide triggers for outburst/misbehaviors and suggestions of best strategies to assist your child):

Payment

Payment Type (Please check):

School Contact/School District:

Case Manager: _____

Phone: _____

Email: _____

DDD Service

Budget paperwork submitted: Yes No

Online Payment

Credit Card:

Visa MasterCard Discover American Express

Credit Card #: _____

Exp. Date: _____

Billing Address: _____ Zip Code: _____

** I authorize a one-time payment of \$ _____ to be made to my card by FRA.

Check Payment:

Check # _____

\$ _____

** Please make all checks payable to 'FRA' and mail to 35 Haddon Ave. Shrewsbury, NJ 07702.

Note: For security purposes we DO NOT/WILL NOT keep a record of
your credit card information.

Print Name: _____ Signature: _____ Date: _____