University of Connecticut
School of Business
Connecticut Information Technology Institute
Certificate Program in Healthcare Informatics & Technology

Please submit this form on-line by clicking the "SUBMIT" button at the bottom of the page. As an alternative you can fill out this form, sign it and email to Elaine.Holman@uconn.edu or secure fax to: 860-486-5497 (attn: Elaine Holman)

Name

Last	First	M.

Mailing Address

No. and Street	City	State	Zip	Country

Email Address | **Date of Birth**

Social Security # | **Gender** ☐ Male ☐ Female | **Home or Cell #**

The University requests that you provide your Social Security Number (SSN). We are required by federal law to inform you of this request. The SSN is collected to enable the University to comply with federal requirements mandated under IRS tax laws and the Title IV student aid legislation and for other administrative purposes. The University assigns each student a unique identifier that is not the SSN that is used for most administrative purposes.

==**Please do not email form with Social Security number included**==.

US Citizen? ☐ Yes ☐ No   **If no, what is your country of citizenship?** [   ]   **Visa Status** [   ]

Marital Status ☐ Single ☐ Married ☐ Divorced ☐ Widowed ☐ Decline to indicate

Ethnicity ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Race ☐ White ☐ Black/African American ☐ Asian ☐ Asian Indian

☐ American Indian/Alaska Native ☐ Central American ☐ Chinese

☐ Hispanic ☐ Japanese ☐ Mexican American ☐ Pacific Islander

☐ Puerto Rican ☐ South American

Military Status ☐ Active Military ☐ Reserve/Nat'l Guard ☐ Retired Veteran ☐ Veteran, not retired

☐ No Military Service ☐ Decline to Indicate ☐ Office Use Only: Other Vet

Highest Degree or Education Completed [   ]   **Year Completed** [   ]

Courses:

NC008: Foundations in Healthcare IT

NC009: Clinical & IT Program Management

NC010: Healthcare Informatics

NC011: Emerging Technologies & Healthcare Strategies

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List course number, course title, start date, end date and the fee of the course you are interested in taking below. You must make sure that the course you would like to enroll in is being offered during the session that you are registering. The session dates for the specific courses are listed in **red** next to the course name and number.

Course Number	Course Title	Start date	End date	Fee

Course Fees: $750 per course. Registration instructions will be sent to you once you are admitted to the program.

Withdraw/Drop Refund Policy: 100% refund prior to course start date. Please note: No refund will be issued once the course starts.

By signing below, I accept responsibility for knowledge of and compliance with all University rules, regulations, definitions and procedures pertaining to my student status at the University of Connecticut. This includes, but is not limited to, any special regulations and procedures concerning course registration, drop or withdrawal, and fee refunds.

Student Signature		Date	

Questions? – Please contact Elaine Holman at Elaine.Holman@uconn.edu