UAW-Ford Industrial Readiness Certificate Program

Registration Information and Important Dates

Macomb Community College

	REGISTRATIC	ON INFORMATION				
	How Does a	Student Register?				
Macomb Community College						
In Person:	7900 Tank, Warren, 48092					
	MTEC Building					
	Front Desk					
Website:	email to workforcedev@macomb.edu					
	IRCP-1	IRCP-2	IRCP-3			
Tuition Cost:	\$313 Total fees if any \$0	\$313 Total fees if any \$0	\$412 Total fees if any \$0			
		Fees if any \$	Fees if any \$			
IMPORTANT DATES						
Term Name	Insert Term Here	Insert Term Here	Insert Term Here			
Registration window:	08/05/19 to 09/14/19	08/05/19 to 10/12/19	08/05/19 to 11/09/19			
Term start/ end date:	09/14/19 to 10/05/19	10/12/19 to 11/02/19	11/09/19 to 12/14/19			
Tuition voucher due date:	09/14/19	10/12/19	11/09/19			
Last date to drop course for full tuition refund:	09/13/19	10/11/19	11/08/19			
Last date to drop course for partial tuition refund (Insert %):	NA/ /	NA/ /	NA/ /			
Process to drop courses:	100% refund if student drops prior start date. 0% if student drops on start date or thereafter.					
Contact person & phone number at school for student questions:	Janet D'Annunzio	Phone (58	36) 498-4157			

REMINDER: Students must apply for tuition assistance at www.myuawford.com and be approved prior to registering at the school. Once registered, students must log back into their

or the scho	wford.com acco ol will be requir	ed to drop stud	lent from the	course.		

svs/opeiu512aflcio



REGISTRATION FORM IRCP8001 – IRCP8002 – IRCP8003

PLEASE PRINT CLEARLY. MUST PROVIDE: FULL NAME, FCA ID #, COMPLETE SSN, & DATE OF BIRTH.

Please list only CURRENT and TRUE information for official records, certificates of completion or certification, and transcripts. This information will be maintained confidentially within FERPA guidelines.

Name: Last	First Middle (optional)	UAW Local No.	Plant Name		
Social Security Number (U.S.)	Birth Date (mm/dd/yyyy)	Macomb ID # (if Known)	Plant Location		
	//				
Country of Citizenship: U.S.	Other Country:				
Home Mailing Address					
City State		Zip Code			
Phone Number (include area code)		E-Mail Address (please print clear	ly)		
Terms & Conditions: I authorize release of my full academic record to my sponsoring employer. I recognize and understand that, if for any reason my employer does not cover costs, I will be held responsible for the charges. If I fail to drop the course during the 100% refund period listed below, and my employer does not cover costs, I will be responsible for the cost. Failure to pay will result in a "HOLD" on records and future registration will not be possible. Delinquent accounts are turned over to a collection agency, assessed a 25% delinquent fee and reported to all credit bureaus. The information as listed on this form is true to the best of my knowledge. Refund Period: 100% refund if course is cancelled by College. 100% refund if student drops prior to the course start date. 0% refund if student drops on or after course start date.					
Signature		Date			
For office use only:					
Date/Time Form Received:					
Ву:					
			JD 040116		

EMAIL COMPLETED FORMS TO: workforcedev@Macomb.edu - Include E-Mail Subject Line: IRCP

REGISTER IN PERSON: Macomb Community College – MTEC – 7900 Tank Avenue - Warren - 48092



REGISTRATION FORM IRCP8001 – IRCP8002 – IRCP8003

Course Number	Section #1	Days	Times	Class Dates	Weeks
IRCP8001		Saturday	8:00AM – 4:30PM	Sept. 14, 21, 28, Oct 5	4
IRCP8002		Saturday	8:00AM – 4:30PM	Oct. 12, 19, 26, Nov. 2	4
IRCP8003		Saturday	8:00AM – 4:30PM	Nov. 9, 16, 23, 30, Dec. 7, 14	6
Course Number	Section #2	Days	Times	Class Dates	Weeks
Course Number	Section #3	Days	Times	Class Dates	Weeks
Course Number	Section #4	Days	Times	Class Dates	Weeks

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