***SPRING 2017 CPA Mail-in Registration Form***

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Last Name First Name Middle Initial

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone Date of Birth □ Male □ Female

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security number\* OR PSU ID no. e-mail address

\* The social security number you provide will be used by the University to verify your identity for official record keeping and reporting.

 Your SSN will be stored in a central system and only used for official reporting and record keeping. It will not be used as a primary

 source to identify you within the Penn State system; the PSU ID will be used as the primary identifier.

Federal law requires that institutions of higher education of higher education gather the following information regarding the ethnicity and race of its students and employees. Your individual information will be kept strictly confidential. The law only requires institutions to report aggregate totals for each category. Please select the appropriate responses.

Is your ethnicity Hispanic/Latino/(Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin?

□ yes □ no

What is your race? (Select one or more) \_\_\_\_\_\_\_\_\_ White \_\_\_\_\_\_\_\_\_ Black or African American \_\_\_\_\_\_\_\_\_ Asian

 \_\_\_\_\_\_\_\_\_ American Indian or Alaska Native \_\_\_\_\_\_\_\_\_ Native Hawaiian or Other Pacific Islander

□ Please register me for Accounting 6040A:

□ Homestead/Munhall (**Carnegie Library Mondays**)

□ South Hills (**Crowne Plaza Wednesdays**)

□ Monroeville (**Double Tree Thursdays**)

Please indicate method of payment:

□ Enclosed is a check for $250, payable to Penn State

□ Bill my company or organization to the attention of: (A letter of authorization must accompany a request to bill. Please provide address if different from above.)

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Name Title

□By checking this box I agree to allow Penn State to use this email address to communicate with me about this program

Your signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Penn State Non-Credit Registration
Box 410
State College, PA 16804

(814)867-4973 (412)675-9040 To register and pay by credit card please visition our website at http://greaterallegheny.psu.edu/cpa-and-enrolled-tax-practitioner-seminars