

Enrollment Application

Personal Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Home Phone: () _____ Alternate Phone: () _____

E-mail Address: _____

Social Security Number: - - - - -

Are you at least 18 years of age? YES NO Birth Date: / /

Are you a U.S. citizen? YES NO If no, are you a resident alien? YES NO

Are you currently working? YES NO If so, where do you work and what is your position? _____

Background Information

Education History: High School Graduate GED Some College
 Associate's Degree Bachelor's Degree Degree: _____

What is important to you when choosing a new career: Doing something I enjoy Good Salary
 Opportunity for advancement Job Security

How did you hear first learn about The Living Services Institute?
 Brochure Newspaper/Magazine Ad Mailing
 Career Fair Online Career Fair/Ad Other: _____

Payment Information

I agree that the payment of program costs will be satisfied by:

Check/Money Order enclosed (*Please make check for \$2995 payable to The Living Services Institute*)

Credit Card (*Circle one: Visa, Mastercard, Discover, American Express*)

Name on Card: _____

Credit Card #: _____ Expiration Date: _____ CID: _____

Authorized Signature: _____

Full payment of your program cost is due by _____

Applicant Signature And Certification

I certify that all information contained herein is true, accurate, and complete to the best of my knowledge and I fully understand and agree to the terms and conditions stated in this application and the current Living Services Institute brochure.

Refund policy: 80% of the program cost will be refunded up to two weeks following the first day of the program. Thereafter, no refund will be issued.

Signature Date

Accepted by: _____

The Living Services Institute, Inc. Date

Submit this completed application form with payment by May 4, 2009

Mail: The Living Services Institute, Inc., Attention: M. Cottone, 8 West 38th Street, 7th floor, New York, New York 10018

Fax: Attention: M. Cottone (212) 328-9135

Email: mcottone@livingservicesinst.com