

## CPCE Driver Education Registration & Matriculation Form

**Instructions:** *To be considered for this course/program, you must submit the following:*

- ✓ *This CPCE Driver Education Registration & Matriculation Form – completed and signed (Please print clearly.);*
- ✓ *A copy of your NJ CEAS, standard New Jersey Instructional Certificate (Any subject is acceptable.);*  
*OR*  
*A copy of your current transcripts from a health or physical education teacher prep/certification program in the State of NJ;*
- ✓ *A copy of your valid New Jersey or out-of-state driver's license.*

*For further information about this course/program, its full set of requirements and any necessary deadlines, please refer to the "Driver Education Course and Endorsement Program Detail Sheet" available under "Academic Services" from [www.rowan.edu/cpce](http://www.rowan.edu/cpce). If/when approved for the course/program, CPCE will send you a registration confirmation email which will outline any remaining registration or payment-related steps.*

### Basic Biographical and Academic Information

Rowan ID (if known)

Social Security Number (optional) \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(MM/DD/YYYY)

1. Legal name \_\_\_\_\_  
*last first middle*

2. Other names that may appear on your academic records \_\_\_\_\_

3. Address \_\_\_\_\_  
*number and street (and apt. # if applicable) city state zip code*

County \_\_\_\_\_ State of legal residence \_\_\_\_\_

Month/year you began living in that state \_\_\_\_\_

4. Home phone number \_\_\_\_\_ Work number \_\_\_\_\_ Cell number \_\_\_\_\_

5. Email address \_\_\_\_\_

*(Please write clearly. Email is the format we will use to provide you with your registration and matriculation information. After you are registered, you will be given information about your official Rowan email, and this is the email address Rowan will use from then on for any communication.)*

### Gender and Ethnicity *(The section below is optional. No information you provide will be used in a discriminatory manner.)*

6.  Male  Female

7. What is your ethnicity?  Hispanic or Latino  Not Hispanic or Latino

If you chose Hispanic or Latino, please choose one of the following:

Central or South American  Cuban  Hispanic-other  Mexican  Puerto Rican

8. Regardless of your responses above, please choose one or more race categories from the list below.

American Indian or Alaskan Native  Asian  Black or African American  Native Hawaiian or other Pacific Islander  White

9. Previous academic or professional preparation:

Major Institution Attended City State Degree Earned Date

Undergraduate Preparation/degree(s) \_\_\_\_\_

Graduate Preparation/degree(s) \_\_\_\_\_

9. Do you plan to apply/did you apply to an undergraduate or graduate program at Rowan University? \_\_\_\_\_

Which one? \_\_\_\_\_ (Please also indicate if this is online/on-campus/off-site)

10. Are you currently matriculated as a Rowan student?  Yes  No

If yes, what program? \_\_\_\_\_

How many credit hours will you register for (excluding this course) for the term in question? \_\_\_\_\_

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**Registration Signature Statement**

(All students who submit this form must fill in the blank and sign and date below in order to be registered.)

By my signature below I give permission to CPCE to register me for the Teaching Concepts of Driver Education course offered:  
\_\_\_\_\_ (term/year)

I verify that I have read the "Driver Education Course and Endorsement Program Detail Sheet," and I have attached to this form any other required materials as outlined in that document. I understand that once registered for this course, costs will be generated and assigned to my account for which I am responsible. I further acknowledge that the information furnished on this form is true and complete. Any misrepresentation of fact will constitute cause for cancellation of the processing of this form or dismissal following registration.

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Student Signature

Date

**Matriculation Signature Statement**

(Those students who also want to be matriculated in the course so that they may be eligible to be submitted by Rowan to the State for endorsement must sign and date below in order to be matriculated. This is in addition to the signature statement above. Refer to the "Driver Education Course and Endorsement Program Detail Sheet" for the additional steps required to be submitted for endorsement.)

By my signature below I give permission to CPCE to matriculate me into the Teaching Concepts of Driver Education course/program.  
(Program code: .BMUE-DRVED/.BMND-DRVED)

I verify that I have read the "Driver Education Course and Endorsement Program Detail Sheet." I understand that I must follow the instructions outlined in Parts B & C of the application process on that form in order for Rowan to submit my credentials to the State for the endorsement.

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Student Signature

Date

**Submit Application Materials to:**

Rowan University, Enrollment & Extension Services, College of Professional & Continuing Education (CPCE), Education Hall, 201 Mullica Hill Road, Glassboro, NJ 08028, FAX: 8562565638.

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**Driver Education Contact Information****Kathleen (Katie) Grillo**

CPCE Administrative Advisor

(Provides assistance from initial inquiry to matriculation)

Phone: 856-256-5130

Email: [grillo@rowan.edu](mailto:grillo@rowan.edu)

**Shari Willis**

Driver Education Academic Advisor

(Provides academic and other assistance after initial registration including—if applicable—submission for endorsement)

Phone: 856-256-3702

Email: [williss@rowan.edu](mailto:williss@rowan.edu)

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**Registration & Matriculation Approvals (FOR CPCE OFFICE USE ONLY)**

Packet/Form received date: \_\_\_\_\_ Rec'd by: \_\_\_\_\_

Missing items? \_\_\_\_\_ Email sent date/initials: \_\_\_\_\_

Packet complete date/initials: \_\_\_\_\_ Sent to AA date/initials: \_\_\_\_\_

Reg date/initials: \_\_\_\_\_ Matric date/initials: \_\_\_\_\_ Confirm email sent date/initials: \_\_\_\_\_

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Approval Signature (from Director of Enrollment & Extension Services or Academic Advisor, if deemed necessary)

Date