

## P.A.C.E. REGISTRATION FORM

STUDENT ENROLMENT, REGISTRATION & RECORDS (SERR)
Bermuda College P.O. Box HM 2718, Hamilton HM LX BERMUDA
T: 236-9000 ext. 4051 | FAX: 239-4051 | E: serr@college.bm

PERSONAL INFO	ORMATION							
Title:	☐ Mrs	M	Is	Miss	STUDENT ID#:			
Surname:		Maiden:		First: _		Middle:		
REGISTERED NAME								
Mailing Address:					Home Address:			
Postal Code:					Postal Code:			
Home Telephone: _					Daytime Telephone:			
E-mail:					Date of Birth: Day _	Month	Year	
RESIDENCY								
	mudian status?	Ves (an to	nevt section)	□ No	(country of citizenship): _			
Do you reside in Ber		_			(country of residence):			
Do you currently have				_				
Is English your first I					rt (see www.toefl.com)			
DECIDENT INTE	DNIATIONIA	1						
RESIDENT INTE				D	h h	and an their Control	N	
					have been on the Island for ernational fees. (See Berm			
classify as a Residen	it iiiteiiiatioilai	Student you wi	ii iiave to pay	the resident int	erriational rees. (See Berri	luda College Catalo		
ETHNICITY & GE	ENDER	Gend	ler: 🔲 Femal	e 🔲 Mal	е			
_					determine admission into I	Bermuda College.		
To which ethnic gro	up do you bel	ong? 🔲			-			
ree	quired. Student	s who knowingly	omit and/or m	nisrepresent requ	and psychological test resulted information shall be subservisit - www.college.bm/image	oject to disqualificat	ion.	
COURSE CODE (e.g. ACC 135)	SECTION (If applicable)	AUDIT (Seniors/Others)	WAITLIST (Yes/No)		COURSE NAME		FEE	
These cards will be o	charged for an nuda Credit As and other expo	y outstanding to sociation (BCA) enses incurred b	uition and fee ), all overdue a	s if accounts are accounts are ref	or debit card information f not paid by sponsors wit erred to the BCA. The stud ting to recover overdue a	hin 90 days of regi dent will agree to p	istration date. As a	
Organisation:				_ Contac	Person:			
Sponsor's Address:					Telephone:			
				_ E-mail:				
PAYMENT METHOD	(See the Busir	ness Services Of	ffice for paym	ent options)	Cash Cr		stercard	
Signature of Applica	ant:				Date:			