CUNY School of Professional Studies

REGISTRATION FORM: RHIA / RHIT TEST PREP (Non-Credit): 11/13/2021

More information at sps.cuny.edu/ Complete ALL fields in this form.

Check one:	name (family	y):				First name (given):					Middle initial:			
🗆 Ms. 🗖 Mrs. 🗖														
Date of birth:							x:							
			🗆 Ma											
Permanent address (street and number):					Apt: City:						State:	Zip code:		
How long have you resided at the above address? Years: Months:					(req	required):								
Years:														
Telephone (Day)					Telephone (Mobile)									
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Are you a graduate student in the CUN or M.S. in Heath In Management prog	Highest Le	Highest Level of Education Attained:				From which CAHIIM accredited scho RHIT or RHIA program did you, or wi graduate from (If not CUNY SPS)?						you, or will you,		
						e College/Associate's Degree Master's Degree Doctorate								
	Course #: Course na			me:		Term	n:	Section:		Date(s):				
COURSE SELECTION(S)	C RHI01	RHIA/RHIT Test Prep				FA2	21 01		November 13th, 2021 9:30am to 3:00pm Virtual					
	REGISTRATION													
TUITION	Check one:						Amount enclosed							
	Graduate / Current Student in CUNY SPS BS or MS in HIM					\$25.00 \$						\$		
	□ All Other Students						\$50.00						\$	
									Total enclosed: \$					
REGISTRATION PAYMENT												a student subject to		
	your payment to travel in the mail. SPS must have your payment by the stated deadline in order to participate.													
				• •		•								
I certify that the information entered on this application is complete and correct.														
Signature of applicant:								Date submitted:						