



**Manufacturing Education Program Manufacturing Certificate Enrollment Form**

Date: \_\_\_\_\_

Name (Circle: Mr. Ms.): \_\_\_\_\_

First Middle Last

E-mail Address: \_\_\_\_\_

Home School: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Student P.O. Box Number: \_\_\_\_\_ Student I.D. Number: \_\_\_\_\_

Local Phone Number: \_\_\_\_\_ Permanent Phone Number: \_\_\_\_\_

Local Mailing Address

Permanent Mailing Address

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

Expected Graduation Date: \_\_\_\_\_

Fall/Spring/Summer Semester Year Degree

Previous Degrees: \_\_\_\_\_

University/College/Institute GPA Date Awarded Degree

Previous Degrees: \_\_\_\_\_

University/College/Institute GPA Date Awarded Degree

Do you anticipate pursuing the International Option? \_\_\_\_\_Yes \_\_\_\_\_No

(If yes, submit MEP International Option Approval Form for pre-approval.)

How did you find out about the Certificate Program in Manufacturing? \_\_\_\_\_

\_\_\_\_\_

Describe any industrial experience: (company name, job responsibilities, length of time, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you attending Georgia Tech under the sponsorship of any organization or firm?

\_\_\_\_\_ Yes    \_\_\_\_\_ No

If yes, the name of the sponsor is: \_\_\_\_\_