

2009 Placement Testing and Advising Program for Incoming Freshmen

PLEASE PRINT

STUDENT'S NAME

STREET ADDRESS

CITY, STATE, ZIP

HOME TELEPHONE

E-MAIL ADDRESS

- I will attend the Placement Testing and Advising Program session on the date indicated below (choose one).
 - Wednesday, July 8
 - Wednesday, August 5
 - Wednesday, August 19
- My \$30 check or money order (payable to Robert Morris University) is enclosed.

2009 Parent Program

- My parent(s) will attend the Parent Program on the date indicated below (choose one).
 - Wednesday, July 8
 - Wednesday, August 5
 - Wednesday, August 19

PARENT'S NAMES(S)

- My parent(s) cannot attend the Parent Program.

Overnight Accommodations

A limited number of rooms in a residence hall are available for lodging the night before the programs.

- I/we need overnight lodging on campus.

Special Services

- Services for a person with disabilities are required. (A representative of the University will contact you to discuss your needs.)

Return the completed form in the enclosed postage-paid envelope with your payment.