

Science of Clinical Investigation Training Program 2016-17 Academic Year Graduate Training Programs in Clinical Investigation

Instructions: Complete and fax (410) 955-9933 or email this form to Stacey Marks (sjmarks@jhu.edu).

Payment can be made by calling 410-502-8053; Checks can be mailed to: JHSPH 615 N. Wolfe Street, Suite W1101, Baltimore, Maryland **Please Allow 5-7 days for your registration to be processed.** Once you are officially registered, you will receive an email containing a Johns Hopkins Enterprise Directory (JHED) Log-in ID (LID) and instructions for creating a password. You will then be directed to log in to ISIS (<u>https://isis.jhu.edu/</u> <u>sswf</u>). Access to ISIS allows you to view registrations, charges, payments and update personal data, etc.

Last Name:	
First Name: Middle Initial:	Professional Category:
	Professional Code: Professional Code 2:
SSN/StudentID:	Please enter the corresponding number(s) in the spaces provided above.
Citizenship: VisaType:	1 Accountant 19 Journalist
	2 Audiologist 20 Chemist 3 Biologist 21 Lawyer
Permanent resident of:	4 Biochemist 22 Mathematician
	5 Biostatistician 23 Medical Student
Street Address:	6 Clergy 24 Microbiologist
	7 Clinical Health Worker 25 Nurse
StreetAddress2:	8 Dietician 26 Occupational Therapist
	9 Dental Hygienist 27 Optometrist
City: State: Zip:	10Dentist28Pharmacist11Economist29Physician
•	12 Engineer 30 Physician
Country:	13 Environmental Scientist 31 Physiologist
	14 Epidemiologist 32 Psychologist
If Maryland, specify County:	15 Health Educator 33 Podiatrist
	16 Health Services Admin 34 Social Scientist
Phone Number:	17 Hospital Clinician 35 Teacher
	18 Information System 36 Veterinarian
Email:	Specialist 37 Not Specified/Other
Sex: Male Female Office L	
	Accounts Office: Payment Accepted:
Date of Birth (MM/DD/YY):	& Registration: Registration Processed:
Ethnic Code (choose one):	
Last Name: First Name:	SSN: Term: Year 15-
Course Number Course Ti	itle Credits Dep Credit Credit Option Credit Option
	Non Credit Credit Audit P
TUITION CHARGES - Tuition Rate is \$1055 per credit for 201	16-17 Isthisanonlinecourse? Yes No
I/O and FUND#	Contact Information:
Payment Information:	Total Credits:
Discover Mastercard Visa	sjmarks@jhu.edu
JHU Remission SAP Account Check Spons	sor Letter Credit = 410-502-6965
Card Number:	Exp. Date (MM/YY): Total Amount:
Cardholder Name: Sign	nature: Date:

All coursestaken for the SOCI Training Program are taken Non Credit and Pass/Fail.

To view the Pass/Fail policy, please visit http://jhsph.edu/student_affairs/registrar/passfail.html