



American Institute of Higher Education Resources

**Application Form for Registration**

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

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**City/ State/Zip Code** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Applying for:**                   **Workshops:\_\_\_\_\_ Tests:\_\_\_\_\_ Consultation:\_\_\_\_\_**

**Name of Workshop:** \_\_\_\_\_

**Name of Test(s):** \_\_\_\_\_

**Reason for Attendance:** \_\_\_\_\_

\_\_\_\_\_

**Comments:** \_\_\_\_\_

**AIHER**

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[www.aiher.com](http://www.aiher.com)