



APPLICATION NEWPORT NEWS SHIPBUILDING NIGHT SCHOOL



ENROLLMENT IN A CLASS IS A COMMITMENT TO ATTEND.
Please do not register unless you are sure you can take part.

Date: _____

Please provide full name and Dept. as listed on company records (no nicknames please!)

Name _____
Last First Middle

Dept. _____ Bldg/Hull _____ Contact Phone No. _____ (please indicate if work or cell #)

PERN # _____ Supervisor _____

Primary Email Address _____

*LIST CLASS(ES) REQUESTED: *Please include night(s) of class(es) as listed on bulletin*

WHICH SHIFT DO YOU WORK? FIRST SECOND THIRD

Locations are based on course requirements, enrollment, and classroom availability.

Please return completed application to:
The NIGHT SCHOOL OFFICE, Dept. 022, Bldg. 1919/3rd floor or Fax to 8-8640

Confirmation email will be sent to email listed above
NO LATER THAN 1 WEEK PRIOR TO THE START OF CLASS.