



NORTHWEST
CAREER COLLEGES
 — FEDERATION —

MEMBERSHIP APPLICATION

700 Sleater Kinney Rd SE, Suite B369
 Lacey, WA 98503
 Phone: 360-259-1313
 www.NWCareerColleges.org

Serving Washington private career colleges

I. Name of school _____
 Address _____
 City _____ State _____ Zip _____
 Phone () _____ Fax () _____ E-mail _____
 Web site _____

II. Primary Contact _____
 Title _____ E-mail address, if different from above _____

III. Type of ownership: () Sole proprietorship () Corporation () Non-profit
 () Publicly traded () Other

Owner _____ How long? _____
 Address _____
 City _____ State _____ Zip _____

IV. Check all agency approvals that apply:

- Licensed by the Workforce Training & Education Coordinating Board
- Licensed by the Washington Department of Licensing
- Authorized by the Washington Student Achievement Council
- Approved for Veterans Training
- Accredited. List agency _____
- Approved, U.S. Department of Education, SFA Title IV programs
- Other:

PAYMENT INFORMATION

- Check enclosed made payable to NWCCF
- Please charge my credit card \$ _____

(VISA/ Mastercard/AMEX)

Number _____

Exp. Date _____

Security Code _ _ _ _

Name on Card:

Cardholder Billing Address:
 Street _____

City _____ St _____

Zip _____

Card Holder Signature:

**Credit card payment/member information may
 scanned/emailed to:
 marvann@nwcareercolleges.org**

I hereby attest that all information provided with this application is accurate to the best of my knowledge.

Signed _____ Date _____