**BEET SUGAR DEVELOPMENT FOUNDATION**

**ENROLLMENT FORM**

**McGinnis Institute of Beet Sugar Technology**

**Beet Sugar Agriculture School**

**(2021)**

|  |  |  |
| --- | --- | --- |
| Company |  | Company Name |
| Applicant |  | First |  | Last |

The above applicant is submitted as a candidate for enrollment in:

|  |
| --- |
| Agriculture SchoolJuly 26 – July 30, 2021 |

Acceptance will be confirmed by **email** by the Foundation before April 23, 2021. Tuition, fees and room will be billed to the applicant's company when exact costs have been determined, after the meeting, in August 2021.

|  |  |  |
| --- | --- | --- |
| Position of applicant in company |  | Position  |
| Applicant’s Mailing address |  | Street or P.O Box |
|  |  | City, State Zip Code |
| Phone number (daytime) |  | Best number to contact applicant |
| Email address |  | This is very important since this is how we send most information |

|  |  |  |
| --- | --- | --- |
| **Hotel information** |  | Click to choose arrival date |
|  |  | Click to choose departure date |

**Please note: Any cancellations must be made 30 days prior to the start of class or your company will be responsible for the entire cost of the one week hotel charge**

Highest level of education reached (i.e. high school, junior college, college, degrees held). If college, please list your field of study. Information will remain confidential.

|  |  |  |
| --- | --- | --- |
|[ ]  High School |  |  |
|[ ]  College |  | Field of Study |
|[ ]  Post Grad |  | Field of Study |
|[ ]  Vocational  |  | Field of Study |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Supervisor approving this app. |  | First and Last Name | Factory Location | Date | Date |

Email application to FrontDesk@bsdf-assbt.org

**TO BE RECEIVED BEFORE APRIL 23, 2021**