

The Right Training. Right Here.

Instructor-Led and Online Courses

NC STATE UNIVERSITY

Computer Training Unit

How To Enroll

- **mail to**
NC State CTU Registrations
Box 7401, Raleigh NC
27695-7401
- **fax to**
919.515.7614
(Fax must have company
PO # or
credit card payment.)
- **call** 919.515.8163
- **e-mail**
ctu_registration@ncsu.edu

NC State University Computer Training Unit Registration Form

WORKSHOP TITLE:

(Please indicate if online classes)

Intro. Interm Adv.
(Please check one.)

1st Date(s)

2nd Date(s)

Fee

WORKSHOP TITLE: (Please indicate if online classes)	Intro.	Interm	Adv.	1st Date(s)	2nd Date(s)	Fee

TOTAL FEES DUE: _____

DESIRED COURSES:

(Please attach additional sheet if necessary; list a first and second choice for dates.)
Limited seating is available. Register as soon as possible to guarantee a seat.

I have met the prerequisites for all classes: Yes No **Initial here:** _____

PLEASE TYPE OR PRINT CLEARLY:

Circle: Mr. / Mrs. / Ms. / Miss _____
(Full Legal Name) First Name Middle Initial Last Name Date of Birth:*
MM/DD/YYYY

Name (to appear on certificates) _____

Full Title _____

Badge Name (if different than above) _____

Note: If your registration fee will be paid by your organization we will need your company/government address information.
If you are paying the fee, we will need your personal address and information.

Home Address _____ Full Business Name and Address: _____

City _____ State _____ Zip _____

Home Phone _____ City _____ State _____ Zip _____

Work Phone _____ Fax _____

Email _____

*In lieu of SSN, Your date of birth is required as a personal identifier for internal record keeping.

The full registration fee or an authorized purchase order number for billing is due at the time of registration.
CTU reserves the right to reschedule/cancel classes without notice prior to the publicized date. Prices subject to change without notice. You must receive a written confirmation from NC State to be considered registered.
For registrations sent within five days of scheduled class, please call to confirm.

METHOD OF PAYMENT

The easiest way to guarantee your place is to pay with a credit card.

(Payment must accompany registration.)

Payor: Company Individual

PLEASE CHECK ONE:

Purchase Order

P.O. # _____

Check Enclosed (Do not fax)

Make check(s) payable to:
North Carolina State University
Please write the name(s) of participant(s)
on the face of the check(s).

Credit Card

Visa MasterCard

American Express

Corporate Card: Yes No

Card # _____

Expiration Date _____

Amount \$ _____

Cardholder's Name (please print) _____

Signature (required) (seal) _____

NC State Employees:
Indicate your OUC # to pay by IDT:

Please return payment and completed registration to:

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Box 7401
Raleigh, NC 27695-7401
Fax: 919.515.7614