



Office of Professional Development
Eastern Washington University
300 Senior Hall
Cheney WA 99004-2442

REGISTRATION FOR CONTINUING EDUCATION UNITS (CEUs)

The attached form is for use when applying for Continuing Education Units (CEUs).

CEUs record hours of attendance in a course, workshop or training. You will be awarded 0.1 CEU per hour attended (10 hours = 1 CEU). No academic grade or credit is earned. The site facilitator **must return** the Participant Roster in order to verify your attendance at the workshop or training.

If you wish to obtain CEUs for the designated course or workshop, please complete the attached form and return with check / money order / Visa / MasterCard payment. The check / money order should be made payable to Eastern Washington University (or EWU) in the amount of \$20.00 per workshop. Cash will not be accepted.

Upon receipt of your completed registration form and payment, EWU will mail you a Certificate of Completion.

Important Information

Cost: \$20.00 per workshop

Payment: Check / Money Order / Visa / MasterCard

Deadline: Participant roster, registration form and payment must be received no later than

Mail or Fax to: Office of Professional Development
300 Senior Hall
Eastern Washington University
Cheney WA 99004-2442
FAX: 509.359.2220

voice: (509) 359.6143 fax: (509) 359.2220

Eastern Washington University is committed to affirmative action and equal opportunity.



**OFFICE OF PROFESSIONAL ADVANCEMENT
NON-CREDIT /
CONTINUING EDUCATION UNITS (CEU)
PARTICIPANT FORM**

Phone: (509) 359-7380

(800) 331-9959

FAX: (509) 359-2220

<http://professional.ewu.edu>

Registering for: <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer				Today's Date:	
Last Name		First Name		Middle Name	
Previous Name					
Current Mailing Address		Street and Number		City	
				State	
				Zip Code	
Email Address				Home Phone Number - including Area Code	
EWU ID Number <small>(Will be assigned by EWU, if not known)</small>				Social Security Number <small>*(Required)</small>	

Directory Information: <input type="checkbox"/> Please restrict my personal information.		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate: _____ <small>(Month/Date/Year)</small>
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Washington Resident: <input type="checkbox"/> No <input type="checkbox"/> Yes From: _____ / _____ To: _____ / _____	Have you previously earned credit through EWU? <input type="checkbox"/> No <input type="checkbox"/> Yes – Qtr: _____ Year: _____
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Classification Category (Based on completed credits):

Freshman (1-44 cr)
 Sophomore (45-89 cr)
 Junior (90-134 cr)
 Senior (135 or more cr)

Post-Baccalaureate
 Graduate (Admitted to EWU Masters)
 Certification
 Non-Credit / Professional Development

Optional: What race do you consider yourself? (Check all that apply)

White (800)
 Black/African American (870)
 Eskimo (935)
 Aleut (941)
 American Indian (597): Name of principle or enrolled tribe: _____

Asian or Pacific Islander: Chinese (605)
 Japanese (611)
 Korean (612)
 Vietnamese (619)
 Hawaiian (653)
 Filipino (608)
 Asian Indian (600)
 Guamanian (660)

Samoan (655)
 Other Asian or Pacific Islander: _____
Specify one group-for example Cambodian, Thai, etc

Are you of Spanish/Hispanic origin? (Check all that apply)
 No. Not Spanish/Hispanic (999)
 Yes. Mexican / Mexican American (722)
 Yes. Chicano/ Chicana (705)

Yes. Puerto Rican (727)
 Yes. Cuban (709)
 Yes. Other Spanish/Hispanic: _____
Specify one group, for example Columbian, Salvadoran, Spaniard, etc

Other Race: _____
 Optional: Religious Preference _____

Course Information: CEU FEE: \$20.00 (REQUIRED AT TIME OF REGISTRATION)			
Subject Code <small>(please leave blank)</small>	Course Title	Conference Date(s)	Location
ZCED 096-94 CRN 61047	IT IS ALL ABOUT TRAINING: WHO'S DEVELOPING YOU?	OCT. 31 – NOV. 1, 2007	Spokane,WA

<p><i>For Office Use Only</i></p> <p>\$ _____</p>	<input type="checkbox"/> Check or Money Order <small>(Made Payable to EWU)</small>	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard Amount _____ Account Number _____ Exp. Date _____ _____ Authorized Signature: _____
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TAX CREDITS FOR TUITION AND FEES

* Eligible taxpayers may claim a tax credit of up to \$1,000 on EWU courses. For more detailed information, please refer to IRS Publication 3064 "Notice 97-60 Education Tax Incentive." For purposes of the new Hope and Lifelong Learning tax credits, Federal law (Section 6109 of the Internal Revenue Code) requires the University to obtain your Social Security Number. Thank you for your cooperation.

Submit Registration and tuition payment to:
 Eastern Washington University/ Department of International and Educational Outreach
 300 Senior Hall, Cheney, WA 99004-2442
 FAX: (509) 359-2220