## PLEASE COMPLETE FORM & PRINT CLEARLY UNIVERSITY OF THE PACIFIC

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CHECK ENCLOSED - PAYABLE TO UNIVERSITY OF THE PACIFIC  VISA OR MASTERCARD NUMBER  EXPIRATION DATE: Charge \$ to my credit card.  Signature RECEIVED BY EMAIL  (\$25 Fee for returned checks)			Pacific, University College for graduate participants degree at UOP. Accept	Post-baccalaureate semester units of credit from University of the Pacific, University College. Professional Development Courses are for graduate participants who are NOT pursuing an advanced degree at UOP. Acceptable where local districts approve and applicable to state licensing where authorized. Tuition fees are	
REG	ISTRATION FOR		nonrefundable. UOP is ful		
ট ō Highest Degre Previously en	ee earned From nrolled in Professional Development	from UOP? YES NO Abbreviations)		OR PRINT NEATLY LACK OR BLUE PEN  FOR ADMINISTRATION USE ONLY Enrollment Date Completion Date	_
<u>CC</u>	OURSE NUMBER:	· ·	E TITLE:		
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S.S.# NAME	HM: WK:	EA CODE & PHONE NUMBER	BIRTH DATE	Please enroll me Number of Semester Units of Credit	e in:
LAST	ADDRESS	FIRST	M.I.	Fee Per Unit \$ !	50
	CITY	STATE ZIP		Tuition Submitted \$2	200
			E-MAIL AD	DRESS (REQUIRED):	

Each course requires a separate Registration Form. Please select one of the following courses:

**P EDU 9290:** Teacher Induction Semester One **P EDU 9292:** Teacher Induction Semester Three

**P EDU 9291:** Teacher Induction Semester Two **P EDU 9293:** Teacher Induction Semester Four

All courses offered are 4 units of semester credit. Refer to the website for Mentor/Support Provider Course Numbers.

## **To Email Registration Form:**

**Step 1**: Download and Save the blank PDF Registration Form to your desktop. Do not type directly onto the Registration Form. First, make sure the Registration Form is saved to your desktop.

**Step 2:** Reopen the saved registration form onto your desktop and type in all the requested information.

**Step 3:** Save the completed Registration Form to your desktop and email the two attachments to us:

- 1) The completed Registration Form.
- 2) Scanned copy of your Certificate of Completion or Letter.

Email to: info@creditsforeducators.com

Please put in the subject line: "Induction Registration"

After receiving your Registration Form, we will send you a confirmation by email. Please allow a few business days to receive your confirmation.

## **To Mail Registration Form**

**Step 1:** Download and Save the blank PDF Registration Form to your desktop. Do not type directly onto the Registration Form. First, make sure the Registration Form is saved to your desktop.

**Step 2:** Complete the form and click the button above or select "File>Print" to print your document. Do not select "Fit to Page" as the entries will not line up in the form, instead select "Actual Size."

**Step 3:** Mail printed Registration Form to our mailing address:

Dr. Allan Lifson Credits for Educators | University of the Pacific 729 West 16th St. Suite B-3 Costa Mesa, CA, 92627

**Make checks payable to:** University of the Pacific.

After receiving your Registration Form, we will send you a confirmation by email. Please allow a few business days to receive your confirmation.