

Jackson State University  
 College of Lifelong Learning  
 3825 Ridgewood Road, Box 23  
 Jackson, MS 39211  
 Phone: (601) 432-6234  
 Toll Free: 1-800-234-6234  
 Fax: (601) 432-6124



## APPLICATION FORM WORKSHOPS, INSTITUTES, AND SEMINARS (CEUs, Contact Hours, and Certificates)

INSTRUCTIONS: Please complete and fax the application form to: Fax number -(601) 432-6124 or mail the form to: 3825 Ridgewood Road, Box 23, Jackson, MS 39211.

Date of Application \_\_\_\_\_ E-mail \_\_\_\_\_

Full Name \_\_\_\_\_ Sex  Male  Female  
 Last First Middle

Present Address \_\_\_\_\_  
 Street or Box City County State Zip Code

Date of Birth -- Mo. \_\_\_\_\_ Day \_\_\_\_\_ Yr. \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone No. Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

MS Resident?  Yes  No

Assignment: (Please check one)

Classroom Teacher/Grade \_\_\_\_\_ Agency \_\_\_\_\_  
 Administrator (Name of Agency)  
 University Staff  
 Childcare Staff Other \_\_\_\_\_  
 Other (Please specify)

Have you ever attended Jackson State University?  Yes  No If yes, last date of attendance? \_\_\_\_\_

If yes, name of program attended \_\_\_\_\_

Race-- ( ) African American ( ) Asian ( ) Spanish American  
 ( ) American Indian ( ) Caucasian ( ) Other (Specify) \_\_\_\_\_

Have you previously earned Continuing Education Units at Jackson State University?  Yes  No

### WORKSHOP/SEMINAR INFORMATION

SEMINAR/WORKSHOP TITLE	TIME	DATE(S)	CEUs ( ) Y ( ) N NO. OF CEUs

METHOD OF PAYMENT  Money Order  Check  Purchase Order Form III CL