ATTENTION: Process Express Items within 24 hours!!!

Special Request Form

Prior Course Information

Please type or print clearly.

Course Title(s) _____

Course Date(s) _____ Workshop City _____

☐ In Person ☐ Textbook ☐ Online

☐ Videotape ☐ CD-Rom ☐ DVD

Registrant Information

Name of Registrant _____

This name will appear on your certificate.

Mailing Address _____

City _____ State _____ Zip _____

Contact phone _____ Fax _____

Area code *Area code*

E-mail _____

Special Request Options

(Express media and express certificate requests will be completed within 2 business days of receiving faxed or mailed form.)

___*Express Media*	*$23.00*
___*Express Certificate*	*$19.00*
___*Certificate Reproduction*	*$5/each*
___*Contact hour verification letter*	*$20 (for multiple workshops)*

Make checks payable to
Board of Regents.

Please charge my: ___MasterCard ___VISA
___Discover ___American Express

Card No. _____

_____ _____

Expiration Date Signature as it appears on your card

Mail or fax your request to:
CASAT/279
University of Nevada, Reno
Reno, NV 89557-0204
Toll free: 866.617.2818
Phone: 775.784.4707
Fax: 775.784.1840