UNIVERSITY of NEW HAMPSHIRE
Professional Development & Training

Noncredit Registration Form

How to Register

- **Online:** Go to the course/workshop you wish to enroll in and click the **Register Now** link by it.
- **By Phone:** Call UNH Professional Development & Training in Durham at (603) 862-7380
- **By Mail:** Complete the registration form and mail with payment to
  UNH Prof Dev & Training, Stoke Hall, 11 Garrison Avenue, Durham NH 03824-3511
- **By Fax:** Fax the registration form with credit card information to (603) 862-7381

Your registration will be processed on a first come, first served basis. Once your registration is confirmed you will receive a receipt and confirmation via email. If you do not receive a confirmation within one week, please contact UNH Professional Development & Training at (603) 862-7380.

Note: USNH Employees Using Staff Tuition Waivers

If you are a USNH benefits-eligible employee, 50% of noncredit tuition (less meals and handouts) may be covered by your USNH tuition benefits.
To take advantage of the tuition waiver, you must submit a "**Tuition Waiver Form**" along with the registration form and the tuition you are required to pay. For **instructions and the Tuition Waiver Cover sheet**, go to: **http://www.learn.unh.edu/TuitionWaiverInstructions.pdf** (Tuition Waiver Forms are available through your HR office, and in the Durham Registration and Business Offices.)

Mail or hand carry this Registration Form along with the Tuition Waiver Form and the Cover Sheet you will download at the above web address to:
UNH Prof Dev & Training, 11 Garrison Avenue, Durham, NH 03824.

Please fill in all the fields below so that we can properly transcript any CEUs you will receive.

Please PRINT CLEARLY!

Date:_____

Last Name_____ First Name_____ M.I._____

Home Address_____
Street City State Zip

Date of Birth: **(required)**_____ Email Address **(required)**_____

Gender: Male___ Female___

Daytime Phone (_____)_____ Evening Phone (_____)_____

Title/Occupation_____ Employer_____

Work Address_____
Street City State Zip

NONCREDIT Registration

Course Title 1_____ CRN_____ Date_____ Location_____Cost_____

Course Title 2_____ CRN_____ Date_____ Location_____Cost_____

Course Title 3_____ CRN_____ Date_____ Location_____Cost_____

PAYMENT INFORMATION

___Check enclosed (payable to UNH)

___I authorize you to do an electronic transfer (e-check)

Name on Check (First_____ Last_____)

Bank Routing Number_____

Account Number_____

___Charge my Credit Card: VISA___ MC___

Card Number_____ Name on Card_____Exp. Date_____

Please call (603) 862-7380 if you need more information.