



Professional & Continuing Education (PACE) Leadership Certificate Registration Form

Complete form and return via fax or mail to:
 • 50 Acacia Avenue, San Rafael, CA 94901-2298 •
 • (415) 485-3255 (415) 482-3575 fax PACE@dominican.edu •

STUDENT INFORMATION

Name: _____ Email: _____
Last First M. Initial

Address: _____

Phone: _____
Daytime Evening Cell Fax

Job Title _____ Employer: _____

Have you ever taken a course(s) from Dominican University before? When? Which program?

Were you enrolled under a different name? _____

How did you hear about us? _____

COURSE INFORMATION

	Leading Strategically	March 14, 2009
	Building & Leading Teams	March 28, 2009
	Leading by Resolving Conflict	April 25, 2009
	Leading by Leveraging Global Diversity	May 9, 2009
	Leading by Persuading in Print	June 13, 2009
	Leading by Persuading in Person	June 27, 2009

PAYMENT INFORMATION

Program Fee: \$2,400 Payment Amount * \$ _____

Individual Class: \$450 MC/Visa/Am Ex _____ exp. _____

Cash, check or Money Order attached Signature: _____
 Name on card: _____ *print*

* Please deduct any applicable discounts (see brochure for details) and enter amount you are paying.

STUDENT ACCEPTANCE: The information listed above is complete and correct.

Student Signature: _____ Date: _____

DOMINICAN UNIVERSITY OF CALIFORNIA (Office Use Only)

Register Date: _____ *Initials* _____ *Payment Date:* _____ *Initials* _____