

CERTIFICATE ORDER FORM



Mail

this completed form to:
Learners Edge
2805 Dodd Road, Suite 200
Eagan, MN 55121



Fax

this completed form to:
952.469.2790
(Use credit card if ordering by fax)

Last Name		First Name		Middle Name		Address	
City		State		Zip		Phone Number (please indicate) ☐ home ☐ work ☐ mobile	
Email Address (Home Email Address Preferred - Necessary for Grade Reporting Purposes)				State of Licensure		Renewal Date (MM/DD/YYYY)	
School Name				School City		School State	
Gender: ☐ Male ☐ Female				Date of Birth (MM/DD/YYYY)			
				Country of Citizenship			
Previous Customer: ☐ YES ☐ NO				Teaching Info		Subject You Teach:	
Previous name or address (including maiden name if applicable):				☐ PreK ☐ 6-8 ☐ Admin ☐ K-5 ☐ 9-12 ☐ Other			
Do you have a Master's Degree? ☐ YES ☐ NO				Undergraduate Institution			
Do you have a Bachelor's Degree? ☐ BA ☐ BS				Undergraduate Year			
Required for CE Graduate Credit							

Registration Information

Registration Accepted:
Spring: July 16-March 15
Summer: December 16- July 15
Fall: March 16- October 15

Coursework Due:
April 15
August 15
November 15

Notes

* To earn a certificate, all courses must be taken from the same college/university
* Courses must be taken within 2 consecutive sessions.
* Past courses taken through Learners Edge and/or another college/university do not apply.
Please note: These certificate/graduate credits are intended to fulfill requirements for license renewal/lane change when the student has obtained proper prior approval. The certificates are not intended for license endorsements or any change in licensure status beyond renewal.

Terms and Conditions

- Group discounts do not apply to certificates.
- Course cancellations accepted only within 30 days of order, a \$40 processing fee will apply.
- Once received, your order will be processed and mailed within 2 business days. Please allow an additional 7-10 business days for standard mail delivery. For rush shipping, add priority shipping in the Check Out area.
- Continuing education graduate credit is intended to fulfill requirements for license renewal/lane change when the student has obtained proper prior approval.
- By submitting payment for these courses, I agree to the Learners Edge terms and conditions: <https://courses.learnersedgeinc.com/terms-and-conditions>
- Information provided during order process (excluding financial information) will be shared with the academic partner you select.

We accept:

Credit Card # Exp. Date CVC Code
(3 digit code on back of card)

Signature

IMPORTANT Is billing information different than above? ☐ NO ☐ YES, please enter the information below.

Name Address

City State Zip

Order Comments:

Certificate Registration Information:

Instructional Strategies (12 credits)	☐ Online	☐ Print-Based
Special Populations (12 credits)	☐ Online	☐ Print-Based
Learning Technologies (9 credits)	☐ Online	
Literacy (K-2) (12 credits)	☐ Online	☐ Print-Based
Literacy (3-8) (9 credits)	☐ Online	☐ Print-Based
Literacy (Secondary) (9 credits)	☐ Online	☐ Print-Based
Early Childhood (12 credits)	☐ Online	☐ Print-Based
Online Teaching (9 credits)	☐ Online	

Please indicate the university from which you would like to receive credit:

Augustana University ☐ Pacific Lutheran University ☐

Standard Shipping (7-10 business days) **FREE**

In a hurry? Priority Shipping add \$6

International Orders add \$20

Order Total

(Payment must accompany registration)

Pricing Information: Check website for current pricing

*tuition is due at the time of registration and payable via credit and/or debit card

By submitting payment for this course(s), I agree to the Learners Edge terms and conditions: <https://courses.LearnersEdgeInc.com/terms-and-conditions>.

Signature

(I agree to Learners Edge Terms and Conditions)

For More Information, Local: 952.469.3454 or Toll Free: 877.394.4930, Email: Info@LearnersEdgeInc.com

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To be eligible for a Certificate, you must complete all required courses in one or two consecutive sessions. Please select one of the session options below.

Certificate Courses must be completed within the session registered.

Literacy (3-8) Certificate

(9 Credits)

Name: _____

Phone: _____

Email Address: _____

OPTION 1: Spring/Summer

☐

(Please check the registration dates on page 1 before making your selection)

SESSION	COURSE #	COURSE NAME (all required)
Spring ☐ Summer ☐	5015	Engaging Students Using Mentor Texts and Writer's Notebooks (3 credits)
Spring ☐ Summer ☐	5044	Successful Strategies in Literacy (3 credits)
Spring ☐ Summer ☐	5040	Increasing Comprehension with Close Reading in Your Classroom (3 credits)