## **CERTIFICATE ORDER FORM**

Mail

Learners Edge

this completed form to:

10523 165th Street West

Fax

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

|  | Lakeville, MN 55044  |                                      |                              |                     | (   |                 | · j · , ·,                                    |                         |                |
|--|--|--------------------------------------|------------------------------|---------------------|---|-----------------|---|-------------------------|----------------|
| Last Name  | First Name   | Middle                               | Name                         |                     | Address   |                 |   |                         |                |
|  |  |                                      |                              |                     |   |                 |   |                         |                |
| City   | State  | Zip                                  |                              |                     | Phone Number (please i  | ndicate)        | □ home  | ∐ wor                   | 'k ∐mobile     |
| Email Address (Home Email  | Address Preferred - Necessary for Grade Reportin   | ng Purposes)                         | State of                     | Licensure           | Renewal Date (MM/DD/)   | YYY)            | Name of                                       | District                |                |
| School Name  |  |                                      | School (                     | City                | S   | chool Sta       | te  |                         |                |
| Gender: 🗌 Male 🛛 Fem   | ale<br>Date of Birth (MM/DD/YYYY)  |                                      | Country                      | of Citizensł        | nip   |                 |   |                         |                |
| Previous Customer:<br>Previous name or address (i  | ES DO including maiden name if applicable):  | Teaching I<br>PreK<br>K-5            | nfo<br>□6-8<br>□9-12         | □ Admin<br>□ Other_ |   | Subject         | You Teach                                     | :                       |                |
| Do you have a Master's D<br>Do you have a Bachelor's<br>Required for CE Graduate Cre                 | Degree? 🗆 BA 🗆 BS  | 5                                    | raduate Ins<br>raduate Yea   |                     |   |                 |   |                         |                |
| Registration Info  | ormation   |                                      |                              | 1                   | Certificat  | e Reais         | tration Ir                                    | form                    | ation          |
| Registration Accepted:<br>Spring: July 16-March 19<br>Summer: December 16-Ju<br>Fall: March 16-Octob | uly 15 August 15   |                                      |                              |                     | Instructional Strategies<br>(12 credits)                        | _               | Online  |                         | Print-Based    |
| Notes  | ses must be taken from the same college/u  | university                           |                              |                     | Special Populations<br>(12 credits)                             |                 | Online  |                         | Print-Based    |
| * Courses must be taken withi<br>* Past courses taken through I                                      |  | versity do not a                     |                              | wal/lane            | Learning Technologies<br>(9 credits)                            |                 | Online  |                         |                |
|  | s obtained proper prior approval. The certif<br>in licensure status beyond renewal.  | icates are not                       | intended for                 | license             | Literacy (K-2)<br>(12 credits)                                  |                 | Inline  |                         | Print-Based    |
| Terms and Conc<br>Group discounts do not apply to<br>Course cancellations accented of                |  | will apply                           |                              |                     | Literacy (3-8)<br>(9 credits)                                   |                 | Online  |                         | Print-Based    |
| Once received, your order will<br>business days for standard m<br>Continuing education gradua        | be processed and mailed within 2 business da<br>ail delivery. For rush shipping, add priority sh<br>ate credit is intended to fulfill requirements for     | ays. Please allow<br>ipping in the C | heck Out are                 | a.                  | Literacy (Secondary)<br>(12 credits)                            | □ C             | Inline  |                         | Print-Based    |
| https://courses.learnersedgei  | per prior approval.<br>nese courses, I agree to the Learners Edge teri<br>inc.com/terms-and-conditions<br>rder process (excluding financial information) w |                                      |                              | mic                 | Early Childhood<br>(12 credits)                                 |                 | Inline  |                         | Print-Based    |
| partner you select.  |  |                                      |                              |                     | Online Teaching<br>(9 credits)                                  |                 | nline   |                         |                |
| We accept: VISA  | DISC VER   |                                      |                              |                     | Please indicate the universit                                   | y from whi      | ch you would                                  | d like to r             | eceive credit: |
| Credit Card #  | Ex   | p. Date                              | CVC Code<br>(3 digit code on |                     |   | Shipping        | Pacific Luth<br>(7-10 busine<br>prity Shippin | ess days)               | FREE           |
| Signature  |  |                                      |                              |                     |   |                 | onal Order                                    | 5                       | -              |
| IMPORTANT Is billing infor   | mation different than above? 🗌 NO 🗌 YES, J   | please enter the                     | e information                | below.              | (   | Payment mu      | Orde<br>ist accompany                         | er Total<br>registratio | <br>on)        |
| Name   | Address  |                                      |                              |                     | Pricing Information   | : Check we      | bsite for currer                              | ıt pricing              |                |
| City   | State  | Zip                                  |                              |                     | *tuition is due at the time of req                              | istration and   | navahle via cro                               | dit and/or              | debit card     |
| Order Comments:  |  |                                      |                              |                     | By submitting payment for this https://courses. LearnersEdgeInc | course(s), I ag | ree to the Learr                              |                         |                |
|  |  |                                      |                              |                     | Signatur <u>e</u> (I  | agree to Lea    | arners Edge Te                                | rms and C               | onditions)     |

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

Copyright © 2016 Learners Edge LLC. All rights reserved. Founded by Teachers. Dedicated to Learning.

|  | To be eligible for a Certificate, you must take                               | Learning TechnologiesCertificate                                  |
|--|---|---|
|  | all required courses in one or two consecutive sessions. Please select one of | (9 Credits)   |
|  | the session options below.  | Name:   |
| Certificate Courses must be completed within the session registered. |   | Phone:  |
|  |   | Email Address:  |
| )P <sup>.</sup>  | FION 1: Summer/Fall (Please che   | ck the registration dates on page 1 before making your selection) |

٦

| OPTION | 11: Summer/Fall |  |
|--------|-----------------|--|
|--------|-----------------|--|

Г

| SESSION | COURSE # | COURSE NAME (all required)                      |  |
|---------|----------|---|--|
| Summer  |          |   |  |
| Fall    | 681      | Web EDU (3 credits)                             |  |
| Summer  |          |   |  |
| Fall    | 5061     | Technology: Byte-Size, Big Learning (3 credits) |  |
| Summer  |          |   |  |
| Fall    | 5751     | Anytime, Anywhere: Today's Learner (3 credits)  |  |

