

LEARNERS EDGE ON-SITE REGISTRATION - 3 EASY WAYS TO ORDER...You Choose!



Order online at:
www.LearnersEdge.com
(Must use credit card if ordering online.)



Complete this form and mail
to: Learners Edge
2805 Dodd Rd., Suite 200
Eagan, MN 55121



Complete this form and fax to:
952-469-2790
(Must use credit card if ordering by fax.)

Last Name _____ First Name _____ Middle Name _____ Address _____
 City _____ State _____ Zip _____ Phone Number (please indicate) home work mobile
 E-mail Address (Home Email Address Preferred - Necessary for Grade Reporting Purposes) _____ State of Licensure _____ Renewal Date (MM/DD/YYYY) _____ Name of District _____
 Name of School _____ School City _____ School State _____
 Gender Male Female _____ Date of Birth (MM/DD/YYYY) _____ Country of Citizenship _____

Previous Customer: YES NO

Previous name or address (including maiden name if applicable): _____

Teaching Info

Subject You Teach: _____

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

Course Pricing (Pricing valid through 8/31/2020)

Graduate Credit
3 Credit Courses = \$449*

* Group and Multi-course Discounts not allowed.

Credit Limits

Summer = 12 credits
Fall = 9 credits

On-Site graduate credit provided by:



CHECK OUT

Location:

Council Bluffs, IA

Fall Session
(coursework due Nov 15)

Summer Session
(coursework due Aug 15)

* The entire amount is due upon registration

* Check or credit card payments are accepted

Course #	Credits/Non-credit	Price
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Order Total		_____

Pricing valid through 8/31/20

Terms and Conditions

- * A \$40 processing fee will apply to all course cancellations.
- * No refunds once course has started.
- * Pricing valid through 8/31/2020
- * Continuing education graduate credit is intended to fulfill requirements for license renewal/lane change when the student has obtained proper prior approval.

* 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 YES NO Is billing information different than above? Yes, please enter the information below.

Name _____ Address _____

City _____ State _____ Zip _____

Order Comments: _____

Paid with Check # _____

(Checks payable to Learners Edge)

Checks payable to Learners Edge (Payment must accompany registration. When you provide a check as payment, you authorize us to use information from your check to make a one-time electronic fund transfer from your account, or to process the payment as a check transaction.)

Signature _____

(I agree to Learners Edge Terms and Conditions)

For More Information, Local: 952-469-3454 or Toll Free: 1-877-394-4930 Email: Registration@LearnersEdge.com