



The Masters Certificate in Project Management

Program Registration

Register me immediately for the following session:

Spring Program: February 9 – June 19, 2012



Three Ways to Register:

MAIL this form to College of Extended Learning
University of New Brunswick, 6 Duffie Drive
P.O. Box 4400, Fredericton, NB E3B 5A3

FAX this registration form to
(506) 453-3572

Please make cheque payable to
The University of New Brunswick

PHONE
(506) 447-3340

Name Mr. Ms. Mrs. First Name _____ Last Name _____ Middle Initial _____

Previous Last Name _____ Position Title _____

Company _____ E-mail _____

Business Address _____

City _____ Province _____ Postal Code _____

Business Telephone _____ Fax _____ Home Telephone _____

Home Address _____

City _____ Province _____ Postal Code _____

Date of Birth _____ S.I.N. _____ Have you taken a course at UNB before? Yes No UNB Student # _____
(YY/MM/DD)

Applicant's Signature _____ Date _____

Brief Professional Background

Previous PM training: None 1 Introductory course A few courses Many Number of years of PM experience: _____

Type of projects you manage: IT implementation/software development Construction/Engineering Other (specify) _____

How did you first hear about this program? _____

Executive Recommending Applicant

Name _____ Title _____

Telephone _____ E-mail _____

Payment Method

Visa Mastercard Amex Cheque (enclosed) Purchase Order (enclosed)

Number _____ Exp. Date _____

Name of Cardholder _____

Cardholder's Signature _____ Date _____

Payment options – please check:

Paid in full \$7,500 CDN (no HST)

Deposit enclosed \$800 CDN (Balance due 2 weeks prior to start date).



Schulich
School of Business
York University
Executive Education Centre

UNB's College of Extended Learning (UNB CEL) is committed to protecting the personal information of our participants. The information collected on this application form will be used solely by UNB CEL to create or update your permanent student record. By completing this form you are agreeing to provide information for this purpose. UNB CEL would like to use your contact information to send you notification of future programs and seminars. Do you agree to the collection and use of this information? Yes No Please initial _____