



Student Information (Please Print)

Name:	
Address:	
City:	
State:	
Zip:	
Date of Birth:	____ / ____ / ____
Phone:	
Email:	

Course Information

X	Course Name	Course Number	Credit Amount	Cost
	Creating Classroom Environments Where Learning Thrives	EDCU9990	1 Semester (1.5 Quarter)	\$120
	Demonstration Teacher Certification Project	EDCU9997	3 Semester (4.5 Quarter)	\$360
	Demonstration Teacher Extension	EDCU9998	3 Semester (4.5 Quarter)	\$360
	Keeping Them in the Room	EDCU9989	3 Semester (4.5 Quarter)	\$360
	Strategies for Small Group Success	EDCU9947	1 Semester (1.5 Quarter)	\$120
	Whole Group Classroom Leadership	EDCU9935	3 Semester (4.5 Quarter)	\$360
	Resident Coach Application of Learning	EDCU 9934	3 Semester (4.5 Quarter)	\$360

Payment Information

___ Check (Payable to Jacki Brickman, Inc.; Send to 2244 149th Ave NW, Andover, MN 55304)

___ Please send me an invoice via email for credit card payment

Signature: _____ Date: ____ / ____ / ____

Office Use Only

Invoice # _____ Check # _____