



# Open Enrollment Application CUSTOMIZED TRAINING

501 West College Drive, Brainerd, MN 56401  
1830 Airport Road, Staples, MN 56479  
1-800-933-0346, Ext. 8142 218-855-8142  
[www.clcmn.edu/BUSIND](http://www.clcmn.edu/BUSIND)

**Registration** Completing this registration form signifies that my name, address, and employer information is current and correct. CLC has permission to update my information as well as register me for this training.

Class Title \_\_\_\_\_ Course Number \_\_\_\_\_ Date(s) \_\_\_\_\_ Fee \_\_\_\_\_

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## Student Information

\_\_\_\_\_  
 Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Former Name \_\_\_\_\_  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Home County \_\_\_\_\_  
 US Citizen  Yes  No Email Address \_\_\_\_\_

Although your registration will be accepted without a social security number, providing it will reduce the likelihood of error when matching data with your registration. Central Lakes College is asking you to provide information that includes private and/or confidential information under State and Federal Law. In the computerized system, the Social Security Number is the primary means of identification. The college will use this information for positive identification to ensure your records are not confused with those of other students. The information collected will only be used for registration purposes by the Central Lakes College and the MnSCU system and will not be sold or distributed.

Birthdate (MM/DD/YY) \_\_\_\_\_ Social Security Number \_\_\_\_\_

|                                 |                                    |  |
|---------------------------------|------------------------------------|--|
| Gender                          | Marital Status                     | Racial/Ethnic Origin   |
| <input type="checkbox"/> Female | <input type="checkbox"/> Divorced  | <input type="checkbox"/> American Indian or Alaska Native          |
| <input type="checkbox"/> Male   | <input type="checkbox"/> Married   | <input type="checkbox"/> Asian                                     |
|                                 | <input type="checkbox"/> Separated | <input type="checkbox"/> Black or African American                 |
|                                 | <input type="checkbox"/> Single    | <input type="checkbox"/> Hispanic or Latino                        |
|                                 | <input type="checkbox"/> Widowed   | <input type="checkbox"/> Native Hawaiian or other Pacific Islander |
|                                 |                                    | <input type="checkbox"/> White                                     |

## Employer Information (Please note, you will also need to complete the 3<sup>rd</sup> Party Authorization Form)

Employer Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Fax Number \_\_\_\_\_ Company Size  1-20  21-50  51-100  Over 100 Employees

**Payment** Total Amount \$ \_\_\_\_\_ (payment, purchase order, or billing information must accompany registration)

Cash  
 Check Enclosed (payable to Central Lakes College)  
 Purchase Order # \_\_\_\_\_  
 Visa  Mastercard  
 Receipt Needed

Name on Card \_\_\_\_\_ Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

(continued)

- ✉ **Mail** completed form & payment to: Central Lakes College, ATTN: Jan Sterner, 501 W. College Drive, Brainerd, MN 56401. If paying by check please make payable to: Central Lakes College
- ☎ **Phone** registrations are accepted only with a credit card: call 800-933-0346x8142 or 218-855-8142
- 📠 **Fax** registration & credit card info: 218-855-8141
- 💻 **Online** registration: [www.clcmn.edu](http://www.clcmn.edu)

### Contact Information

**Toll Free** 1-800-933-0346, Ext. 8142  
**Phone** 218-855-8142  
**Fax** 218-855-8141  
**Website** [www.clcmn.edu/BUSIND](http://www.clcmn.edu/BUSIND)  
**Mail** Central Lakes College, Attn: Jan Sterner, 501 West College Drive, Brainerd, MN 56401

### Policy/Information

- Please register at least 7 days in advance. A decision whether a class will be held is made one week before the class starts based on the number of paid registrations. Within 7 days of the class start, registrations are accepted based on availability for that course.
- Class confirmation is not sent.
- Refunds: A full refund is issued if you contact us 7 days prior to the start of the class, or if a class is cancelled. Once the class starts there is no refund.

### Accommodations

Central Lakes College is committed to a policy of nondiscrimination in employment and education opportunity. No person shall be discriminated against in the terms and conditions of employment, personnel practices, or access to and participation in, programs, services, and activities with regard to race, sex, color, creed, religion, age, national origin, disability, marital status, status with regard to public assistance, sexual orientation, or membership or activity in a local commission as defined by law. This information is available in alternative format upon a 48-hour advance request by contacting Paula Huss in Disability Services, office C111 at 800-933-0346 ext 8175. Deaf and Hard of Hearing users or TTY communication contact the "Minnesota Relay Service at 7-1-1 or 1-800-627-3529." Revised 10/11/10

### Directory Information

Central Lakes College has designated the following information as directory information. Directory information is public data unless you request this data to be treated as private data.

- |   |   |
|---|---|
| •Student's name   | •Address (local and permanent)  |
| •Telephone number   | •Email address  |
| •Hometown   | •Date of graduation   |
| •Major field of study   | •Height and weight of athletes  |
| •Degrees, honors and awards received                          | •Dates of attendance  |
| •Participation in officially recognized activities and sports | •Enrollment status (i.e., enrolled, withdrew, full-time or part-time) |
| •Photographs (still or motion)                                |   |

### Implications of Withholding Your Directory Information

If you request that we withhold your directory information, all requests for information from non-institutional persons or organizations will be refused without your written authorization, **except where required by law**. For example, the college would be unable to verify degree, major or enrollment for possible employment, loan deferment, insurance eligibility, home mortgage applications, apartment leases, etc. unless the request is accompanied by your signed, dated release. Central Lakes College cannot assume responsibility for contacting you for this authorization, nor can we accept liability for honoring your request that such information be withheld. Your request to withhold your directory information will remain in effect until you inform us in writing to rescind it.

Students may direct that any or all of the above-listed Directory Information be withheld from public disclosure by notifying the Registrar in writing. *Non-Disclosure of Public Information* forms are available from the Records and Registration Department at [www.clcmn.edu/registration/forms.html](http://www.clcmn.edu/registration/forms.html).

Sincerely,

Nick Heisserer  
Registrar

Revised 10-11-10