

FOR THE FEDERAL EXECUTIVE INSTITUTE'S
LEADERSHIP FOR A DEMOCRATIC SOCIETY PROGRAM
Fax Back to
434-979-3387
Questions? 434-980-6200

FOR MANAGEMENT DEVELOPMENT CENTER
PROGRAMS AND FOR CONTINUING DEVELOPMENT
PROGRAMS FOR EXECUTIVES AT FEI
Fax Back to
304-870-8009
Questions? 304-870-8008

FIRST CHOICE

Program Name _____
Program Code *(FEI Only)* _____
Program Date _____

SECOND CHOICE

Program Name _____
Program Code *(FEI Only)* _____
Program Date _____

PARTICIPANT INFORMATION:

Name _____ SSN* _____
Job Title _____
SES or GS Grade Level: _____ or Equivalent Position/Rank (specify) _____
Division _____
Agency/Organization _____
Office Street Address _____
City _____ State _____ ZIP _____
Office Phone _____ Fax _____
email Address _____ Nickname _____
Home Address _____
City _____ State _____ ZIP _____ Home Phone _____

ACCOMMODATION INFORMATION:

Smoking Room Physically Challenged _____
 Special Dietary Needs _____

TUITION BILLING INFORMATION:

- Agency Training Form (SF182, DD1556, MIPR, Other) *(copy attached)*
- Government Bank Card *(Visa or MasterCard)*

* SSN and Bank Card information is used internally for registration and billing purposes only. The information will not be disclosed to other sources.

Card Number* _____ Expiration Date _____
Cardholder _____
Cardholder's Phone # _____ Fax # (for receipt): _____
Tuition Amount _____

PRIVACY ACT STATEMENT

A Social Security Number is collected by the authority of Executive Order 9397 (November 22, 1943) and strictly used as an identifier for our records.