

REGISTRATION FORM
SPRING WORKSHOPS
February 20 – March 21, 2009

Please fill out one registration form for each participant. You may use photocopies of this form if more than one person wishes to register.

Name: _____

Teacher _____ Administrator _____ Highest degree: _____

Major: _____ University: _____

Subject(s) you teach _____ Experience: _____ years

School or organization: _____

Please check the workshop(s) in which you wish to enroll

- | | | | | | | |
|----------------------------|----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 6 | <input type="checkbox"/> 7 |
| <input type="checkbox"/> 8 | <input type="checkbox"/> 9 | <input type="checkbox"/> 10 | <input type="checkbox"/> 11 | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |

School:

Mailing address: _____

Email _____ Fax _____

Applicant:

E-mail _____ Phone _____

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Note: Participants are registered on a first-come first-served basis. The Department of Education reserves the right to cancel workshops when insufficient numbers of participants are registered. In such cases fees will be refunded.

*Payment in U.S. dollars or its equivalence in Lebanese pounds is to be made **by check** payable to the American University of Beirut. Registration is incomplete until one registration form per participant and payment are submitted to:*

AUB, Department of Education, Fisk Hall, Room 105, 9:00 a.m. – 4:00 p.m.

Deadline for registration is Feb. 17, 2009
For further information please contact us at:

AUB, Fisk Hall, Room 105
Phone: 01-350000 or 374374 Ext. 3060/1
Fax: 01- 744461
E-mail: dep@aub.edu.lb