LEAN/SIX SIGMA FUNDAMENTALS CERTIFICATE PROGRAM
September 7, 8, 14, 15, and 21, 2013
LOCATION: Carson Engineering Center, Room 121, 8am – 5pm

Please return registration to:
CCE Registration
The University of Oklahoma
1700 Asp Avenue, Room B-1
Norman, OK 73072-6400

FAX your registration to:
(405) 325-7164 or call
(405) 325-6034

PIF # 551-6101-401

Mr. Ms. Mrs._____
Last First M.I.

Name (for certificate)_____

Email Address_____Student ID# _____

Student Home Address_____
Street City State Zip

Company_____

Company Address_____
Street City State Zip

Home Phone_____ Work Phone_____

Will you be an **OU** student when this class begins? ___Yes ___No
Will you be a student enrolled at a different college when this class begins? ___Yes ___No

$385___OU Student $1150___Non-Student $875 ____ OU Staff

$550___Non-OU Student (students attending other colleges) – ***proof of student status, such as a class schedule, must be provided with registration.***

The University of Oklahoma reserves the right to change scheduling, presenters, costs and location, if necessary. **TOTAL PAYMENT IS DUE at the time of registration. Registrations without payment will not be accepted. THIS WORKSHOP IS LIMITED TO THE FIRST PAID 40 registrations. *There will be no refund for withdrawals or cancellations.*** This course is offered on a self-supporting basis and fee waivers may not be applicable. For general information regarding the workshop, please contact Jonathan Garner jcgarner@ou.edu 405 / 325-6906. For information concerning registration, please contact Michelle Bassham mbassham@ou.edu or 405 / 325-6034. If you have questions concerning workshop content, contact Dr. B. M. Pulat bpulat@ou.edu or 405 325-4532.

Participant Signature_____ Date_____

___The College of Continuing Education is committed to making its activities as accessible as possible. The College and the University provide a range of special services for persons with disabilities. If you anticipate a need for some of these services, please indicate this by checking this item.

All payments must be made in U.S. funds.

___ Check - Please make checks payable to **University of Oklahoma**

___ Credit Card- please call Michelle Basham to register using a credit card (405)325-6034 in addition to faxing this form.

___Please bill my company or agency. A copy of the purchase order or letter of authorization is attached.

Revised: 10-01-12