

College of Continuing Education

Local Government Certificate Programs

Registration Form (please print clearly)

Address: Home Work (invoicing purposes)

Last Name _____ First Name _____ Middle Initial _____

Job Title _____ Organization _____

Home or Work Address _____

City _____ Prov. _____ P.C. _____

Phone: () _____ Other () _____ Date of Birth _____

Email Address _____
(please print clearly)

*Fall 2016 Sept 12 – Dec 5, 2016	*Winter 2017 Jan 9 – Apr 3, 2017	*Spring 2017 Apr 10 – Jun 26, 2017
<input type="radio"/> Local Government <input type="radio"/> Public Administration Professionalism <input type="radio"/> Community Economic Development II <input type="radio"/> Policy Planning and Program Evaluation <input type="radio"/> Local Government Accounting	<input type="radio"/> Municipal Law I <input type="radio"/> Organizational Behaviour and Leadership <input type="radio"/> Citizen Engagement and Consultation <input type="radio"/> Financial Management <input type="radio"/> Human Resource Management	<input type="radio"/> Property Taxation and Assessment <input type="radio"/> Local Government Finance <input type="radio"/> Sustainable Communities <input type="radio"/> Community Economic Development I <input type="radio"/> Municipal Law II

registrations are limited to **25** per course and are accepted on a **first come first served basis**. You are strongly urged to register prior to **August 31, 2016** for all 2016/2017 courses.

Payment Information

Please make cheque payable to **College of Continuing Education**. If an employer is to be invoiced, a letter of authorization **must** accompany this registration form, otherwise registration **will not** be complete. You will receive confirmation of your registration from Dalhousie University by email.

Admission Fee (all new students pay a one-time, non-refundable fee) **\$125** \$ _____

Course Fee (\$945 per course) \$ _____

Total Course Fees \$ _____

Method of Payment

- Enclosed is a cheque payable to **College of Continuing Education**
- Please bill my employer. A copy of my pre-approved P.O. or letter of authorization is attached.
- Please charge Credit Card Personal **or** Organization

VISA MC AMEX Card Number:
 _____/_____/_____/_____ Expiry: ____/____

Signature: _____

Pre-registration is required for all courses.

Payment is due at time of registration unless there is a pre-approved P.O. or letter of authorization attached.

Please indicate the program for which you are registering.

- Associate Certificate in Local Government Administration
- Certificate in Local Government Administration (CLGA)
- Certificate in Local Government Human Resource Administration (CLGHRA)
- Certificate in Local Government Financial Administration (CLGFA)
- Certificate in Local Government Administration: Law and Ethics (CLGALE)
- Certificate in Local Government: Citizen Engagement and Consultation (CLGCEC)
- Certificate in Local Government: Community Economic Development (CLGCED)
- National Advanced Certificate in Local Authority Administration (NACLAA)

Alberta Students:

- National Advanced Certificate in Local Authority Administration Level I
- National Advanced Certificate in Local Authority Administration Level II

To apply for the **NEW** Executive Certificate in Local Government, please go to dal.ca/cce or call 902-494-7459

For Office Use Only

Registration Date: _____

Alex# _____

Please note: *There is no refund after the course space opens.*

The cost of textbooks and/or course packs is **not** included in the Course Fee.

All Students

By submitting this form and signing below you are indicating that you have read, understood and agree to abide by the procedures and policies contained in the **Program Regulations Handbook**. The handbook can be found at www.dal.ca/cce. Proceed to: Continuing Management Education; Local Government.

Signature: _____ Date: _____

APPLICATION FOR PROGRAM ADMISSION (new students only)

Education

Institution	Degree/Diploma/Certificate/ Professional Designation	Year completed or highest level obtained

Work Experience

Employer	Position	Years of Service

You may wish to submit, under separate cover, additional information to support your application.

How did you hear about the local government certificate programs?

- Brochure Professional Association Seminar/Workshop Word of Mouth Conferences
 Other _____

Submit this completed form with
a cheque/P.O. number/Credit Card/
Letter of Authorization to



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