EDUCATIONAL SERVICE CENTER of Northeast Ohio

Office use only
Rec'd_____
VESi_____ MB_____

Professional Development
VESi Online Registration Form
9/1/2022 – 8/31/2023

*Indicates required field

*Present Date: _____ (mo.) (day) (year)

*Social Security Number: Last Four XXX-XX- __ __ __ __

*Name: _____ (last) (first) (middle)

*Phone: ( ) _____ (area code)

Other names under which you have registered: _____

*Home Address: _____ (number & street) (city) (state) (zip) (county)

☐ check if new address

*Date of Birth: _____ (mo.) (day) (year)

*Gender: ☐ male ☐ female

*E-mail: _____

Place of Employment: _____ (District) (School)

Work Phone: ( ) _____ (area code)

In order for the University to respond to required state and federal questionnaires, you are asked to assist us, on a voluntary basis, by selecting the most appropriate description of your race and ethnicity.

Ethnicity: ☐ Hispanic/Latino ☐ Not Hispanic/Latino

Race: ☐ American Indian/Alaskan Native ☐ Asian ☐ Black/African American
☐ Native Hawaiian/Pacific Islander ☐ White/Caucasian

*I have at least a bachelor's degree ☐ yes ☐ no

*I have a valid teaching certificate/license ☐ yes ☐ no

Course Title _____

❒30 PLHs $195.00 ❒45 PLHs $220.00

REGISTRATION AND PAYMENT ARE NON-REFUNDABLE

Course must be completed within 6 months of purchase date to receive a Certificate of Completion

Method of Payment payable to ESC: ❒ Check # _____
❒ Purchase Order ISSUER and #_____

Student Signature _____

Please return completed registration form and payment to:
ESC of Northeast Ohio
ATTN: Roni
6393 Oak Tree Blvd * Independence, OH * 44131
For questions please contact Roni Staimpel at roni.staimpel@escneo.org