



Office use only	
Rec'd _____	
VESi _____	MB _____

Professional Development
VESi Online Registration Form
2021-2022

*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 \$205.00 45 PLHs \$235.00
Professional Learning Hours are granted through Ashland University

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

Student Signature _____

REGISTRATION AND PAYMENT ARE NON-REFUNDABLE
Course must be completed within 6 months of purchase date to receive a Certificate of Completion

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