THE UNIVERSITY 101

Teaching Experience Workshop

May 8-10, 2012

University of South Carolina, Columbia, South Carolina

Application for Enrollment

Visitors to the University of South Carolina

To register for the workshop:
Please return this form as soon as possible. We will confirm your acceptance by email. If we cannot accommodate your request, we will notify you, place your name on a waiting list, and contact you promptly if we have a cancellation. We thank you for your interest and look forward to hearing from you.

Please **print** or **type** application:

Name_____ Position/Title_____

Institution _____ Work Address _____

City _____ State_____ Country _____ Zip Code _____

Work Telephone (___) _____ Work Fax (___) _____

E-mail address_____ Home or Cell Phone (___) _____

I have the following special needs for access or diet:_____

Reasons for attending _____

_____

_____

Workshop Fees:	**Amount**
$395 for one participant from a visitor's institution	_____
$350 each for two or more participants from a visitor's institution	_____
$300 each for S.C. Technical Colleges	_____

Mailing Address	Phone / Fax	Make Checks Payable to
The Teaching Experience University of South Carolina University101 1728 College Street Columbia, SC 29208	Phone: (803) 777-6029 Fax: (803) 777-5405	University of South Carolina Federal ID Number: 57-6001153