

# NDSU DISTANCE & CONTINUING EDUCATION

PO Box 6050, Dept. 2020, Fargo, ND 58108-6050  
701-231-7015 (Local) ♦ 800-726-1724 (Toll Free)  
Web Site: [www.ndsu.edu/dce](http://www.ndsu.edu/dce)

**FOR OFFICE USE:**

App #: \_\_\_\_\_

App Date: \_\_\_\_\_

Previously taken a course at NDSU? \_\_\_ Yes \_\_\_ No      Student ID # \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Initial (Former - *required*)

Mailing Address \_\_\_\_\_  
Street/PO Box/Apt City State Zip County

Work Phone ( ) \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Email Address (NOTE: This address will be used for all NDSU correspondence) \_\_\_\_\_

<i><b>Dept &amp; Course #:</b></i>	<i><b>Cr</b></i>	<i><b>Course Title</b></i>	<i><b>Instructor</b></i>	<i><b>Location</b></i>	<i><b>Date</b></i>
<b>HNES 2000</b>		<b>Nat'l Sport Specific Coaching</b>	<b>B. Strand</b>	<b>Des Moines, IA</b>	<b>6/20/2022</b>

***Fee Schedule & Receipt***

***Method of Payment***

Gender: \_\_\_\_\_ F \_\_\_\_\_ M

Course Fee \$  
Materials \$  
Other \$ \_\_\_\_\_  
TOTAL: \$

**Fee paid by NDHSCA**

Birthdate: (*required*) \_\_\_\_\_

SS: # (last 4 digits optional)      XXX / XX / \_\_\_\_\_

**Fill in credit amount {2 or 3 cr.} Thank you!**

