Continuing Education Registration

Center for Risk Management

320 Delany Road
La Marque TX 77568
Phone: #: 409-933-8162
Fax #: 409-933-8027
E-mail: riskmanagement@com.edu

Name (Last _____ First _____ Middle Initial) _____

CHECK ONE:

1. Do you consider yourself to be Hispanic/Latino?
   ☐ Yes ☐ No
2. In addition, please select one or more of the following racial categories to describe yourself:
   - ☐ American Indian or Alaskan Native
   - ☐ Asian
   - ☐ Black or African American
   - ☐ Native Hawaiian or Pacific Islander
   - ☐ White

Mailing Address _____ City _____ State _____

Zip _____ Student ID # or SS # _____ Date of Birth _____ Sex _____ Home Phone _____

Business/Cell Phone _____ E-Mail Address _____

This is to certify that ☐ I AM ☐ AM NOT a legal resident of the College of the Mainland District. To be a legal resident of College of the Mainland District, you must reside in one of the following school districts: Hitchcock, Santa Fe, (including Algoa, Arcadia, Alta Loma), Texas City, La Marque and Dickinson.

Signature _____ Date _____

	Course #	Course Name	Instructor	Date	Cost	CEQ
☐	SAFE-1821-OSHT-1071-122CL	Active Shooter Preparedness	C. Rosier	11/16KMy	No-Cost	M18
☐	SAFE-1822-OSHT-1071-123CL	Crushing It: Leading As a High Performer	M. Hernandez	11/30/18	No-Cost	M18
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