Clark County School District

CCF-159 Rev. 7/16

CCSD \$

PROFESSIONAL DEVELOPMENT EDUCATION (PDE)

Registration Form

						
PDE Number Sess	on Class Title					
	\$			Licensed (CCSD) Licensed (Non-CCSD) Support Staff		
Start Date	Class Location		Fee			
					Suppo	on Stail
Last Name (as listed on Personnel File,) First (as listed	on Personnel Fi	re)	MI		
X X X – X X –			*To locate you	r Teacher		PDE Office Use
Last 4 Digits of SS Number	*Nevada Teacher Lice	ada Teacher License Number		ber, go to	aov/	Only
С	Н			http://nvteachersearch.doe.nv.gov/.		Money Order
Contact Telephone Numbers						
						occ
Mailing Address	City		State	ZIP		Receipt
Email Address	Current Gra		ade Level / Subject			Received/
	/					Enrolled
Location Name	Loc. Code	Location P	hone	Ext		_

Cancellations require a 48-hour notification prior to the start of class.

All refunds will be assessed a \$15 processing fee. Refunds will not be made after class begins.

You can type on this PDF form. Print out the completed CCF-159 and submit to the PDE Office along with a money order payable to CCSD.

You are not officially registered in a class until the PDE registration form and payment have been received in the PDE Office.

Send completed registration form(s) and money order(s) to the PDE Office via school (PDE Office, Location #131) or U.S. Mail (PDE Office, 3950 S. Pecos-McLeod, Las Vegas, NV 89121-4396).