When do I use this form?

Use this form to enroll in ITSS fee courses if you are paying by Stanford University department account number, Stanford Hospital Tuition Assistance, or personal check. If you are a Stanford employee and you are using your STAP funds to pay for course fees, register online at the Axess portal (go to http://axess.stanford.edu, log in, and click on the “Training” tab.) If you have questions, please call Technology Training Services at 723-4391.

Which parts of the form do I need to fill out?

Everyone needs to fill out the “Registrant Information” at the top of the form. Please print clearly and provide all the requested information. Your staff ID number is the 8-digit number found underneath your name in the upper left corner of your staff ID card.

University staff, faculty, students, and other affiliates should enter the information for their requested courses in the second section of the form. Staff are also required to obtain their supervisor’s signature approving their registration form courses. Have your supervisor sign in the “Supervisor Approval” space at the end of the section.

SLAC, Stanford Hospital, and LPCH employees should enter course information — and follow the special instructions — in the appropriate lower section of the form.

How do I pay for courses that have fees?

SLAC, Stanford Hospital, and LPCH employees should read the special instructions in their respective sections of the form. University staff, faculty, and students may pay for courses through any combination of STAP funds (see below), University department account, or personal check.

IMPORTANT: If you are paying wholly or partially by check, you must add an 8% surcharge to the total course fee. For example, if you are registering for a course with a $275 fee and are paying wholly or partially by check, you must pay a total of $297 ($275 + $22). Write a separate check for each class, payable to Stanford University.

To use a University department account, check the appropriate box and enter the PTA numbers; have an approver with signature authority for that PTA sign directly below the PTA number.

Am I eligible for STAP funds?

If you are a University employee (other than a faculty member) and are working at least half time, the Staff Training Assistance Program might pay your course fees up to $800 per fiscal year. For more information about STAP, call Training and Organizational Development at 723-0657. SLAC staff should call the SLAC Training and Development Office at ext. 2265.
ITSS Registration Form: Summer 2005

Use this form to enroll in ITSS fee courses if you are paying by Stanford University department account number, Stanford Hospital Tuition Assistance, or personal check. If you are a Stanford employee and you are using your STAP funds to pay for course fees, register online at the Axess portal (go to http://axess.stanford.edu, log in, click on the “Training” tab). If you have questions, please call Technology Training Services at 723-4391.

Register Information:
First Name: __________________________  Last Name: __________________________
Daytime Phone: ______________________  Email: __________________________

Affiliation (check one):  University Staff  Faculty  Visitor/ Post Doctoral  SLAC Staff  Temporary Staff  SUH/LPCH Staff
(please specify)

Course and Payment Information for University Employees, Students, and Other Affiliates
(SLAC, Stanford Hospital, and LPCH employees skip to appropriate section below)

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Payment method (check one):  ☐ Personal Check (add 8% to course fee)  Amount: $____________
☐ University Account  __________________________  Award: $____________
Account Approver’s Signature: __________________________  Print Name: __________________________

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Payment method (check one):  ☐ Personal Check (add 8% to course fee)  Amount: $____________
☐ University Account  __________________________  Award: $____________
Account Approver’s Signature: __________________________  Print Name: __________________________

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Payment method (check one):  ☐ Personal Check (add 8% to course fee)  Amount: $____________
☐ University Account  __________________________  Award: $____________
Account Approver’s Signature: __________________________  Print Name: __________________________

Supervisor Approval (REQUIRED for all University Staff)
Supervisor’s Signature: __________________________  Phone Number: __________________________

Course and Payment Information for SLAC Employees

Instructions:  1. Fill out the “Register Information” section above.
2. Write in the Course Code, Course Date, and Fee Amount below. Do not write in the grey box.
3. Complete a SLAC Training System Request.
4. Submit all forms to SLAC Training & Development Office, Mail Stop #11 for processing. DO NOT send forms directly to Training Registration. For more information, call the SLAC Development Office at ext. 2265.

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

(To be completed by SLAC Training & Development Office)

Training and Development Office Approval: __________________________

Course and Payment Information for Stanford Hospital and LPCH Employees

Instructions:  1. Fill out the “Register Information” section above.
2. Write in the Course Code, Course Date, and Fee Amount below.
3. If you are paying wholly or partially using Stanford Hospital Tuition Assistance, check the box and write in the dollar amount. You must also complete a Tuition Assistance Application per Stanford Hospital policy, and attach a photocopy to this registration form.
4. If you are paying wholly or partially by personal check, mark the box and write in the dollar amount; be sure to include the 8% surcharge. Make checks payable to Stanford University. Write a separate check for each class.
5. Send registration, with attached photocopy of Tuition Assistance form, to address shown in the margin at left.

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Payment method:  ☐ Tuition Assistance: $____________
☐ Personal Check (add 8% to course fee): $____________

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Payment method:  ☐ Tuition Assistance: $____________
☐ Personal Check (add 8% to course fee): $____________

Course Code: ITSS—  Course Date: __________________________  Course Fee: $____________

Payment method:  ☐ Tuition Assistance: $____________
☐ Personal Check (add 8% to course fee): $____________
ITSS REGISTRATION FORM: SUMMER 2005

Use this form to enroll in ITSS fee courses if you are paying by Stanford University department account number, Stanford Hospital Tuition Assistance, or personal check. If you are a Stanford employee and you are using your SLAP funds to pay for course fees, register online at the Axess portal (go to http://axess.stanford.edu, log in, click on the "Training" tab.) If you have questions, please call Technology Training Services at 723-4394.

registrants fill out this section ▶▶▶

First Name: ___________________________ Last Name: ___________________________
Daytime Phone: ___________________________

Affiliation (check one): __________
- University Staff
- Faculty
- Visiting Scholar
- Post Doctoral
- SLAC Staff
- Temporary Staff
- SUH/LPCH Staff
- Other (please specify)

Course and Payment Information for University Employees, Students, and Other Affiliates
(SLAC, Stanford Hospital, and LPCH employees skip to appropriate section below)

Course Code: ITSS— Course Date: __________
Payment method (check one):
☐ Personal Check (add 8% to course fee) __________
Amount: $__________
☐ University Account __________
Amount: $__________
Project: ___________________________ Task: ___________________________
Account Approver’s Signature: ___________________________ Print Name: ___________________________

Course Code: ITSS— Course Date: __________
Payment method (check one):
☐ Personal Check (add 8% to course fee) __________
Amount: $__________
☐ University Account __________
Amount: $__________
Project: ___________________________ Task: ___________________________
Account Approver’s Signature: ___________________________ Print Name: ___________________________

Course Code: ITSS— Course Date: __________
Payment method (check one):
☐ Personal Check (add 8% to course fee) __________
Amount: $__________
☐ University Account __________
Amount: $__________
Project: ___________________________ Task: ___________________________
Account Approver’s Signature: ___________________________ Print Name: ___________________________

Supervisor Approval (REQUIRED for all University Staff)
Supervisor’s Signature: ___________________________ Phone Number: ___________________________

Course and Payment Information for SLAC Employees
Instructions:
1. Fill out the “Registrant Information” section above.
2. Write in the Course Code, Course Date, and Fee Amount below. Do not write in the grey box.
3. Complete a SLAC Training System Request.
4. Submit all forms to SLAC Training & Development Office, Mail Stop #11 for processing. DO NOT send forms directly to Training Registration. For more information, call the SLAC Development Office at ext. 2265.

Course Code: ITSS— Course Date: __________
Course Fee: $__________

Course Code: ITSS— Course Date: __________
Course Fee: $__________

Course Code: ITSS— Course Date: __________
Course Fee: $__________

Training and Development Office Approval: ___________________________

Course and Payment Information for Stanford Hospital and LPCH Employees
Instructions:
1. Fill out the “Registrant Information” section above.
2. Write in the Course Code, Course Date, and Fee Amount below.
3. If you are paying wholly or partially using Stanford Hospital Tuition Assistance, check the box and write in the dollar amount. You must also complete a Tuition Assistance Application per Stanford Hospital policy, and attach a photocopy to this registration form.
4. If you are paying wholly or partially by personal check, mark the box and write in the dollar amount, be sure to include the 8% surcharge. Make checks payable to Stanford University. Write a separate check for each class.
5. Send registration, with attached photocopy of Tuition Assistance form, in address shown in the margin at left.

Course Code: ITSS— Course Date: __________
Payment method: ☐ Tuition Assistance: $__________
☐ Personal Check (add 8% to course fee): $__________

Course Code: ITSS— Course Date: __________
Payment method: ☐ Tuition Assistance: $__________
☐ Personal Check (add 8% to course fee): $__________

Course Code: ITSS— Course Date: __________
Payment method: ☐ Tuition Assistance: $__________
☐ Personal Check (add 8% to course fee): $__________

Course Code: ITSS— Course Date: __________
Payment method: ☐ Tuition Assistance: $__________
☐ Personal Check (add 8% to course fee): $__________

SLAC employees fill out this section ▶▶▶

Fax to: 725-0995 or
Mail to:
Training Registration
Spruce Hall F6
Mail Code 4144
Stanford, CA 94305
Please use additional forms if you wish to register for more courses.
You can download a printable PDF version of this form from http://techtraining.stanford.edu/form305.pdf
Faxing recommended.

Stanford Hospital and LPCH employees fill out this section ▶▶▶