

**Western Oregon University—Division of Extended Programs  
Traffic Safety Education Registration Form**

Name \_\_\_\_\_ Email Address\* \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Phone Number \_\_\_\_\_ Where Do You Teach Driver Ed? \_\_\_\_\_

\* Note: Please double-check that your email address is complete and legible. Confirmation and information about your course will be sent via email.

Please register me for the following course(s):

**1. Foundations of Traffic Safety Education** (Must complete before taking another course)

Location: \_\_\_\_\_ Starting date: \_\_\_\_\_

- Non-credit participant (\$95 materials fee)
- Grad. credit participant—Ed 607, 4 cr (\$200 plus materials = \$295) CRN \_\_\_\_\_

**(Grad credit participants: Please answer additional questions at bottom of page)**

**2. Fundamentals of Classroom Traffic Safety Education** (Pre-requisite is Foundations of Traffic Safety)

Location: \_\_\_\_\_ Starting date: \_\_\_\_\_

- Non-credit participant (\$35 materials fee)
- Grad. credit participant—Ed 607, 4 cr (\$200 plus materials = \$235) CRN \_\_\_\_\_

**(Grad credit participants: Please answer additional questions at bottom of page)**

**3. Fundamentals of Behind the Wheel** (Pre-requisite is Foundations of Traffic Safety)

Location: \_\_\_\_\_ Starting date: \_\_\_\_\_

- Non-credit participant (\$35 materials fee)
- Grad. credit participant—Ed 607, 4 cr (\$200 plus materials = \$235) CRN \_\_\_\_\_

**(Grad credit participants: Please answer additional questions at bottom of page)**

**For Graduate Credit Participants:**

Do you have a Bachelor's degree? \_\_\_\_\_  
Social Security Number / WOU V# \_\_\_\_\_  
Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Gender M / F  
Are you a US Citizen? Y / N  
How long have you lived in Oregon? \_\_\_\_\_

**Ethnic Group:**

- \_\_\_ Alaskan Native (specify tribal affiliation)
- \_\_\_ American Indian (specify tribal affiliation)
- \_\_\_ Asian American (specify ethnic group)
- \_\_\_ Black, African American, Non-Hispanic
- \_\_\_ Hispanic American (specify ethnic group)
- \_\_\_ North African (please specify)
- \_\_\_ Middle Eastern (please specify)
- \_\_\_ Pacific Islander (specify ethnic group)
- \_\_\_ White, European American, Non-Hispanic
- \_\_\_ None of the above. Please write ethnic/racial identification you use. \_\_\_\_\_
- \_\_\_ Decline to respond

Method of Payment (payment for text/materials must accompany registration form):

- Check enclosed, payable to Western Oregon University
- Purchase Order (include copy with registration form)
- VISA/MasterCard/Discover

Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ "V" code: \_\_\_\_\_

Name as it appears on Card: \_\_\_\_\_

Authorizing Signature: \_\_\_\_\_

**Mail:** DEP  
345 N Monmouth Ave  
Monmouth, OR 97361

**Fax:** (503) 838-8473  
**Phone:** (503) 838-8483