



Registration Form

Please select the Interactive Virtual Learning Course(s) you would like to take:

Center Staff*:

- Budgeting
- Fundraising
- Grantwriting
- Strategic Partnership Development
- Teach the Teacher

Residents:

- Career Preparation
- Financial Literacy
- Microsoft Office 2007 Certification

*Center staff includes all persons involved in the operation and/or management of a Neighborhood Networks center.

Please select preferred format of participation: Live Archived Both

Participant Information:			
Please select one: <input type="checkbox"/> Center Staff <input type="checkbox"/> Resident <input type="checkbox"/> Property Owner/Manager <input type="checkbox"/> HUD Staff			
First Name:		Last Name:	
Title (Optional):		E-mail:	
Phone Number:		Fax Number:	
If HUD staff, please indicate location: <input type="checkbox"/> Headquarters <input type="checkbox"/> Field Office _____ <div style="text-align: right;">(Location)</div>			
Neighborhood Networks Center Information:			
Center Name:			
Center Director:			
Address:			
City:		State:	Zip Code:
Phone Number:		Fax Number:	
Property Management Company/Owner Information:			
Please select one: <input type="checkbox"/> Property Management Company <input type="checkbox"/> Property Owner			
Company/Owner Name:			
Contact Person:			
Address:			
City:		State:	Zip Code:
Phone Number:		Fax Number:	

Registrants will receive an email confirmation with login information and course instructions. Registration forms may be completed online at www.NeighborhoodNetworks.org, submitted via email to NeighborhoodNetworks@hud.gov, faxed to 301-589-2493, ATTN: IVLC, or mailed to Neighborhood Networks IVLC Coordinator, 8403 Colesville Road, 10th Floor, Silver Spring, MD 20910.

The Privacy Act requires us to notify you that we are authorized to collect this information under Title 12 (12 U.S.C. 1701z-1 et seq.). Section 1701z-1: Research and demonstration; authorization of appropriations; continuing availability of funds. The Secretary of Housing and Urban Development (HUD) is authorized and directed to authorize such programs as research, studies, testing, and demonstration relating to admission and programs of the Department as he determines to be necessary and appropriate. The information requested on this registration form is necessary so that HUD can verify your eligibility to participate in the Interactive Virtual Learning Courses (IVLCs). If you do not provide the information, you will not be allowed to participate in IVLCs.