



# Class Registration Form

## Organizational & Talent Development

County of Santa Barbara

267 Camino del Remedio, Santa Barbara, CA 93110

euregis@co.santa-barbara.ca.us

Please fill out the form completely and print neatly. Incomplete or unreadable information will delay enrollment.  
 This form may be used for multiple course enrollments for the same person.  
 When complete, you may email to the above locations.

### PARTICIPANT INFORMATION

Print Legal Last Name	First Name	Middle Initial
Print Email Address	Phone Number	
I am a:	<input type="checkbox"/> New Student	<input type="checkbox"/> Returning Student
I am an employee of:	<input type="checkbox"/> County of Santa Barbara	Employee ID Number: _____
	SBC Department:	_____
<input type="checkbox"/> Other – Outside Agency	Name of Agency:	_____
	Address of Agency:	_____
		_____
Job Category: (check one)	<input type="checkbox"/> Office Professional <input type="checkbox"/> Professional/Technical <input type="checkbox"/> First Line Supervisor <input type="checkbox"/> Manager <input type="checkbox"/> Executive	-

### COURSE INFORMATION

Course Number	Course Name	Location, Date & Time

Print Supervisor's Name

Supervisor Signature

Date

Thank you for supporting your employees in attaining higher levels of skill and competency. Please encourage your employees to share what they learn and ask them how they will apply their new skills on the job.