

**STONY BROOK UNIVERSITY**  
**SCHOOL OF PROFESSIONAL DEVELOPMENT – Registration Form**  
**NCE 325 MICROSOFT WEB DESIGN CERTIFICATE PROGRAM**

Name: \_\_\_\_\_

Last 4 Digits of SS# \_\_\_\_\_ or Stony Brook ID # \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Evening Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

Certificate Program Breakdown → Please Complete

COURSE #	COURSE NAME	TIME	START/END DATES
NCE 325.4	Designing a Web Site with Microsoft Publisher		
NCE 325.5	Adv. Web Page Design & Site Management with front Page		
NCE 325.9	Creating Digital Images for Web Design		
NCE 325.8	Web Design Project		

Fee: \$599

Registration Fee: \$10

**TOTAL: \$609**

You are enrolled upon receipt of your registration form and fee. Full refunds will be given for courses cancelled by SPD only. Once payment is processed there is a \$25 cancellation fee.

Send registration form with payment to:

School of Professional Development  
 Social and Behavioral Sciences Building Room N-248  
 Stony Brook, New York 11794-4314  
 Phone: (631) 632-7022 \* Fax: (631) 632-5794 \* Email: amy.margolies@stonybrook.edu

To pay with one of the following credit cards: MasterCard, Visa, Discover card or American Express, you MUST complete the Credit Card Authorization Form. Checks should be made payable to: **SUNY at Stony Brook IFR 900012**. CASH PAYMENTS MUST BE PAID DIRECTLY TO THE BURSAR'S OFFICE.

**\*\*NOTE TO BURSAR: Deposit into IFR 900012 and return registration form with receipt to Amy Margolies at zip = 4314. KEEP THE CREDIT CARD AUTHORIZATION FORM FOR YOUR RECORDS.**

School of Professional Development  
Stony Brook University  
SBS N-248  
Stony Brook, NY 11794-4314

**CREDIT CARD AUTHORIZATION FOR IFR 900012**  
(Must be accompanied by a registration form)

Name of Student: \_\_\_\_\_

Address: \_\_\_\_\_

Last 4 Digits of SS# \_\_\_\_\_ or Stony Brook ID# \_\_\_\_\_

Check One:

American Express: \_\_\_\_\_ Discover Card: \_\_\_\_\_

Master Card: \_\_\_\_\_ Visa: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Authorized Amount: \$ \_\_\_\_\_

Cardholder's Names (please print): \_\_\_\_\_

Cardholders Signature: \_\_\_\_\_

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