

**Chancellor's Certificate in Internetworking with Routers
Application Form**

To enroll in this certificate program, please complete this application form and return it with your \$25 nonrefundable application fee to:

UM-St. Louis
Routers Certificate
West County Computer Center
1715 Deer Tracks Trail
Suite 240
St. Louis, MO 63131

Name _____

Address _____

City/State/Zip _____

Social Security No _____

Daytime Phone _____ Home Phone _____

E-mail Address _____

Please verify that you've met these prerequisites by checking the appropriate spaces:

I have a working knowledge of network terminology.

I am comfortable with an industry standard operating system, such as UNIX, Windows NT, or Windows 2000.

Fee:

The \$25 nonrefundable application fee is payable by check or charge. Checks should be made payable to **UM-St. Louis**.

I have enclosed a check for \$25.

Please charge to my:

MasterCard / VISA / Discover # _____

Amount Paid \$25 Exp. Date _____ Signature _____

If paying by credit card, you can fax this application form to 314.966.0409.