

Registration Form

Professional Development/SDE/Recertification/Continuing Education

Module 1

Name:			
Address:			
City:	State:		Zip:
Phone number:			
Email:			
Registration: \$165			
Current USC Supervisor (10% Discount):	\$144		
		Total:	
Form of Payment (Select one):			
Check #			
Money Order #			
*Make check navable to LISC COMD			

Wake check payable to ose comb

Send Registration Form to:

USC Department of Communication Sciences and Disorders 1224 Sumter Street, Suite 300, Columbia, South Carolina 29201

****The course will be accessed digitally****

Registration Questions:

Email Felicia Hunter at **fhunter @mailbox.sc.edu**