



APPLICATION FORM 2019-2020

NAME: _____

TITLE: _____

FIRM: _____

ADDRESS: _____

WORK PHONE: _____

CELL PHONE: _____

EMAIL: _____

EDUCATION: _____

Our firm currently uses the following software for scheduling:

Microsoft Project Other: _____

Please tell us about your experience:

IN THE INDUSTRY

AS A PROJECT MANAGER

I promise to do my best to attend all classes. I understand that I will have to make-up missed classes in the future years in order to graduate.

Check here if you require a special accommodations under the American with Disabilities act.

YOUR SIGNATURE

YOUR SUPERVISOR'S NAME/SIGNATURE

Please review all of the registration instructions on the other side.



ESSENTIALS *of*
PROJECT MANAGEMENT

Certificate Program

REGISTRATION NOW OPEN!

REGISTRATION INSTRUCTIONS:

1. Submit a completed application and check for \$595 made payable to MCA in any of the following ways:



VIA EMAIL

RLINTOW@MCA.ORG



VIA MAIL

MCA OF CHICAGO
7065 VETERANS BLVD.
BURR RIDGE, IL 60527



VIA FAX

630-655-3287

If you prefer to register using a credit card, we accept VISA and MasterCard. Please call the MCA office to charge your credit card at 312-384-1220.

2. The deadline to submit applications is **September 6, 2019** or until sold out (note: this program tends to fill up quickly).
3. MCA will fill this section based on first come, first served.
4. Candidates will be notified of their acceptance into the program.
MCA of Chicago occasionally videotapes, records or photographs events for the purpose of promoting the association and/or attendance at future events. By registering for this program you agree to allow us to use your name and likeness for such purposes.
For questions, please contact Rebecca Lintow at 312-384-1220 or email rlintow@mca.org.

**REGISTRATION DEADLINE:
SEPTEMBER 6, 2019 OR UNTIL SOLD OUT**

Please fill out the application form on the other side.