This is a Printable Form

Return Registration form and Payment by mail to: Dr. Richard Herzog, Texas CPM Program P.O. Box 13045, SFA Station Nacogdoches, TX 75962

Texas Certified Public Manager Program

Registration Form

Name:				
Job Title:				
Organization:				
Mailing Address:				
City:		State:	Zip:	
Work Phone:	Cell	Phone:		
Fax:E-N	Mail:			
Registering for Course(s): Please check all that apply:		□ Check	Payment O	ptions
☐Track 1: Personnel Administration			for \$	is enclosed.
☐Track 2: Managing for Quality		Make payment payable to: TX CPM		
☐Track 3: Organizational Communication		<u>Program</u>		
☐Track 4: Public Finance & Budgeting		□Cash		
☐Track 5: Productivity & Program Evaluation	n	☐Invoice (Please invoice my organization for \$)		
☐Track 6: Information Systems for Managers	s			
☐Track 7: Applied Research Practicum				
Program fee:	_			

per track
(Includes Textbooks, Class Materials, Break
Supplies and Breakfast/Lunches.)
Registration is not complete until payment is
received.