

SOUTH CENTRAL COLLEGE

COMMERCIAL VEHICLE INSPECTION RECERTIFICATION

(PLEASE FILL IN FORM COMPLETELY)

NAME: _____

Birth date: _____

HOME ADDRESS: _____ HOME PHONE: (____) _____

CITY, STATE, ZIP: _____ MALE: ____ FEMALE: ____

*CURRENT INSPECTION NUMBER: _____ Company County: _____

COMPANY NAME: _____ COMPANY PHONE: (____) _____

CONTACT PERSON: _____

COMPANY ADDRESS: _____

CITY, STATE, ZIP: _____

COMPANY E-MAIL ADDRESS: _____

Course Code Number	Date of Class	Title of Class	Time	Cost
		Commercial Vehicle Recertification	8:00am	\$75.00

PLEASE NOTE: YOU HAVE 6-MONTHS AFTER YOUR EXPIRATION DATE TO BE RECERTIFIED. IF YOU GO BEYOND THE 6-MONTH DATE, YOU WILL BE REQUIRED TO TAKE THE CERTIFICATION EXAM. PLEASE CHECK YOUR EXPIRATION DATE.

METHOD OF PAYMENT:

___ Check enclosed (Make check payable to South Central College)

___ VISA (13 or 16 digits) _____ Exp. date: _____ CID# _____

___ MasterCard (16 digits) _____ Exp. date: _____ CID# _____

Signature of Cardholder: _____ Date: _____

___ Company Billing (please be sure to complete pertinent Company Information)

Please Mail or Fax Registration to:

SOUTH CENTRAL COLLEGE (CBI)
NORTH MANKATO CAMPUS
ATTN BOOKSTORE
PO BOX 1920
NO MANKATO MN 56002-1920
or
Fax: (507) 625-4868