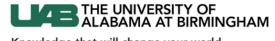


Registration Form Research Training Program – Fall 2015 Course

October 6, 13, 20, 27 and November 3, 10, 17, 2015 Tuesdays 7:45 am – 12:00 noon Children's Harbor Building, 4th Floor, Bradley Conference Center

Name:	Title:	Nurse
Campus		
Phone:	Email:	
Background: Years of research expe What GCP/ICH courses	rience:s have you taken in the past?	
Where did you hear about the RCTP course?		
ENROLLMENT FEE:	\$125.00 (Please select your method of payment)	
	e to UAB) Form (for GL Oracle Accounts) Form (for GA Oracle Grant Accounts)	
	der Form or Cost Transfer Form please fax (205-93 with appropriate funds transfer paperwork to Sara I u).	•
	hecks (personal, HSF or UAB) must be made paya form with check to the attention of Sara Davis at t	
Campus address CHB 303 UAB zip code: 171	CHB 303	

Limited Enrollment – Applications without enrollment fee will not be processed.



Birmingham, AL 35233-1711