

MICHIGAN CYBER SAFETY



Gain a comprehensive understanding of the dangers that exist on the Internet and how to steer children clear of these threats. The Michigan Cyber Safety Initiative (Michigan CSI) is an Internet safety education program administered through the Michigan Attorney General's office. Representatives from Michigan CSI will discuss topics including online predators, cyber bullying, and tools to employ in your home to protect your children.

For additional information on Michigan CSI, please visit www.michigan.gov/ag and click on the Key Initiative button, Cyber Safety Initiative.

CES2 6125

Wednesday

One Day

Section: 940016

December 5

Fee: FREE

12:00 - 1:00 pm

Location: Waterman 210 A,B,C

MI CSI reps



Henry's

Stop into Henry's and
grab a bite to eat.



 Schoolcraft College
**Continuing Education
AND Professional Development**



CES2 6125	Wednesday	One Day
Section: 940016		December 5
Fee: FREE		12:00 - 1:00 pm
Location: Waterman 210 A,B,C		MI CSI reps

Register NOW By Mail, Touchtone, Web, Fax or Walk-In!!

To register, complete the form below and return at least one week prior to class start date.
For more information, please call Continuing Education and Professional Development at 734-462-4448
or visit our web site www.schoolcraft.edu.

Refunds are issued in accordance with college policy.

It is the policy of Schoolcraft College that no person shall, on the basis of race, color, national origin, gender, age, marital status, creed, or handicap, be excluded from participating in, be denied benefits of, or be subjected to discrimination during any program or activity or in employment.

CEPD Registration Form—Fall 2007

Date of Birth ___/___/___ **OR** Student Number _____ **OR** SS# _____
To be assigned to first-time students.

Last		First		MI/Former		This data is optional and confidential:	
Number		Street		City		State Zip	
Home Phone		Work Phone		Alternate Phone (cell)			
Section No.		CES No.		Title of Course			
9 4 0 0 1 6		2 - 6 1 2 5		Michigan Cyber Safety			
_____		_____		_____			
_____		_____		_____			
_____		_____		_____			
_____		_____		_____			

Female Male
 White Black or African American
 Hispanic or Latino Asian Other
 American Indian or Alaskan Native
 Native Hawaiian or Other Pacific Islander

AMT: \$ Free
 AMT: \$ _____
 AMT: \$ _____
 Total: \$ _____

For office use only
 Please use one registration form per student. Duplicate this form as needed.

Enclosed is my Check/Money Order payable to Schoolcraft College
 Charge to VISA/MC/Discover No. _____ Exp. Date _____

Signature required for charge card payment _____

Company-paid Tuition: Please send a copy of your purchase order when you register.
 Co. Name _____
 Co. Address _____
 Billing Contact Person _____
 PO# _____

Fax: With a charge card number you can now fax your registration to 734-462-4572. Please enter this end first.

Mail to: Schoolcraft College/Cashier: CE
 18600 Haggerty Rd.
 Livonia, MI 48152-2696