Non-UPMC Employee Registration Form

OCN® Test Review Course
May 15, 2020 & May 19, 2020

Complete Course Information is available on our website at:
http://www.upmccancercenter.com/professionalEducation/courses.cfm

Please type or print. Submit individual registration forms for each registrant.

Name with Credentials: _______________________________________________________

Email Address: ____________________________ Telephone Number: _________________________

Hospital/Agency Affiliation: __________________________ Department Name: _________________________

Manager’s Name: ____________________________ Manager’s Email Address: _________________________

Class time is from approximately 8:00 am to 4:30 pm.

Exact time and location of classes will be provided in a confirmation letter sent one week prior to class.

Cancellation Policy:
• If you cannot attend any class day for any reason, you need to directly notify the course registrar by calling 412-623-3651 and leaving a voicemail message or by emailing Kendallyn White at hoscheidk@upmc.edu.
• For class cancellations, an announcement will be available at 412-623-3651 and an email will be sent to class attendees.

Check One: ______ UPMC and UPMC Affiliate – Tuition Waived
               ______ Non-UPMC Affiliate – $80 Fee

Payment is due on the first day of class. Please make check payable to University of Pittsburgh of the Commonwealth System of Higher Education and send it with this form to the address below. Checks will not be processed until the first class date.

Please email registration and send payment to:
Kendallyn White, Professional & Patient Education
UPMC Cancer Pavilion, POB 2
Room 354, Suite 3B
5150 Centre Avenue, Pittsburgh, PA 15232
Telephone: 412-623-3651
Fax: 412-623-3650
E-mail: hoscheidk@upmc.edu