

AUSTISM SPECTRUM DISORDER (ONLINE WEBINAR) CERTIFICATE

Submit this form in person or by mail to: UT Arlington Continuing Education 140 W. Mitchell, Arlington, TX 76019 M: 817-272-2581 cedregistration@uta.edu

Status of Processing: Certificate request forms will be processed within ten business days of receipt. If you do not receive a receipt of confirmation within this time frame, contact our office at 817-272-2581. All certificates will be sent via email and shipped via USPS.

Application Information: Students must complete all program requirements prior to submitting this application. Students will be provided with both a paper and a PDF copy of the certificate of completion.

STUDENT INFORMATIO	N			
Last Name	Firs	t Name		
Mailing Address				
City		State	Zip	
Phone	Email			
CERTIFICATE REQUIREM	IENTS			
5 Required				
Intro. To Autism Spe	ectrum Disorder (ASD7305)			
Ethics & Cultural Iss	ues in Treatment (ASD7306)		
Alternative Commu	nication Techniques (ASD73	07)		
Developing the Sup	port Network (ASD7308)			
Partfolia Praject (AS	SD7309)			



FEE & PAYMENT

Notes:

I have		Duine	
Application Foot Includes paper and RDF		Price	
Application Fee: Includes paper and PDF		\$50.00	
certificate			
Charge To:			
Visa N	Master Card [viscover American Expr	ess
Card Number:			
Expiration:			
Authorized Cianature			
Authorized Signature:			_
Authorized Signature:			
OFFICE USE ONLY			
	Date	Completed By	
OFFICE USE ONLY Processed			
OFFICE USE ONLY			
OFFICE USE ONLY Processed			
Payment Received			
OFFICE USE ONLY Processed Received			
Payment Received			
Processed Received Payment Received Reviewed Certificate Emailed			
Payment Received Reviewed			
Processed Received Payment Received Reviewed Certificate Emailed			