## TRAINING COURSE APPLICATION

Return to: APSA Continuing Education Committee P.O. Box 2233, Phoenix, AZ 85002-2233 PH: (602) 476-1737

NAME:			
(Print your	name, as you want	it to appear on your ce	ertificate.)
MAILING ADDR	ESS:		
CITY:		STATE:	ZIP:
HOME PHONE: _		WORK PHONE:	:
EMPLOYER:			
Arizona Supreme Chave entered the clunderstand that the	Court to carry a con asses I prefer to at e fees and the app	ntinuing education creatend, and have checked	have been approved by the dit for the designated hours. I d the fees that apply to me. I eceived at the above address, e non-refundable.
COURSE NAME:			
LOCATION:	-	y Inn & Suites Tucson orth Freeway, Tucson, A	•
Sunday, I Server (2	December 8, 2019, hour course) December 8, 2019,	9:00 a.m. – 11:00 a.m.	A.C.P.S (6 hour course) and Spanish for the Process  Evictions in Arizona (2
CLE HOURS:			
TOTAL COST:	(\$15.00 PER CLE	E HOUR)	
materials provided these courses are 1 RCP (4)e, but is a	in the courses are not a substitute for symbol of my prot wards the continu	e copyrighted. There a registration and apport fessional level within t	ociation, I understand that all are no refunds. I understand intment with the Court under the legal community, and will eeded under the rules of The
SIGNED:			DATE: