

Registration Form

Hereby I register bindingly for the course:

Course name: Course number: Start date:

via e-mail: info@stz-itpm.de

via post: Steinbeis-Transferzentrum IT-Projektmanagement
Favoritengärten 21, 71634 Ludwigsburg

Your contact person for all questions: Carmen Hellmann

e-mail: hellmann@stz-itpm.de, Tel: 07141 - 97 22 800

▶ **Participant's address:**

Family name, first name

Position/Department

Company name

Company street

Company postal code and city

Company telephone

Company e-mail

Private e-mail

▶ **Invoice address (if different):**

Company

Dept. /Contact person

Street

Postal code and city

Place/Date

Stamp and signature

▶ The invoice shall be sent to:

participant's e-mail address

other e-mail address:

by post to the invoice address

▶ Desired certification: Basic Certificate Level D

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Most of our training courses are supported by the Ministry of Economic Affairs BW from the European Social Fund (ESF) budget. The net course fee then is **reduced by 30%, for 50+ participants by 50%**. Target groups: employees, freelancers, entrepreneurs, career break returners, with place of employment or residence in Baden-Württemberg. The federal, state and local employees cannot be supported. Please contact us if you have any queries.

The participant of the training course complies with this conditions and applies for support in accordance with the ESF.

Participant's **date of birth:**

Signature: