



FAX COMPLETED APPLICATION TO: 703.485.4141 THEN MAIL PAYMENT WITH SIGNED APPLICATION TO: EARNED VALUE MANAGEMENT INSTITUTE, P.O BOX 1965 LEESBURG VA 20177

***NOTE: We will send registration confirmation via email upon receipt of full payment

Step 1: Student Information	Please complete all fields:
(Your name is exactly what appears on your certificate) *First Name:	
(Your name is exactly what appears on your certificate) *Middle Name:	
(Your name is exactly what appears on your certificate) *Last Name:	
*Job Title:	
*Organization:	
*Mailing Address:	
*City:	
*State:	
*Zip Code:	
*Country (If Outside the USA):	
*Work Telephone Number (add extension, if applicable):	
*Permanent Telephone Number (add extension, if applicable):	
*FAX Number:	
*PERMANENT EMAIL ADDRESS:	
*What is your highest level of education?	
*How did you hear about the EVMP® Program?	
*Was the www.evmi.com website useful?	

*Permanent email is where we can reach you in case you change jobs. Such as with a @gmail.com, @hotmail.com etc extension

Step 2: Course Information	
For more details regarding the course location and date please visit: http://www.evmi.com/register_earnedvaluemanagement_fundamentals.html	
Course name:	Earned Value Management Fundamentals Course
Date:	
Location: Select One Location Only	

