Breastfeeding Education for Providers
Creating a Network of Support for Families

This interactive course is designed as an in-depth introduction for providers who work with parents and babies. The content focuses on infant nutrition from a psychosocial perspective with a goal of helping

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**Cancellation/Refund Policy:**

If a class is cancelled or student drops (according to the refund policy), refunds will be issued to the student, unless a third party has been formally billed by SCC Business Office.

**Registration Form - Non-Credit Course**

Complete this form with payment information and send via FAX or mail to: Southeast Community College, Continuing Education, 301 S. 68th St. Place, Lincoln, NE 68510

**Today’s Date**

__________

Social Security Number OR SCC Student ID Number

<table>
<thead>
<tr>
<th>Name: <em>Last</em></th>
<th>First</th>
<th>Middle Initial</th>
<th>Email Address</th>
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**Residence Mailing Address**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County</th>
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**Birth Date**

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**Ethnicity (select one):**

- Hispanic or Latino
- Not Hispanic or Latino

**Race (select one or more):**

- White
- Black or African American
- Asian
- American Indian or Alaska Native
- Native Hawaiian or Other Pacific Islander

**Cell**

**Business Phone**

**Home Phone**

**COURSE NUMBER**

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**Location**

<table>
<thead>
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<th>Location</th>
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<th>Cost</th>
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<tr>
<td>Breastfeeding Education for Providers</td>
<td>June 14, 2021</td>
<td>LIVE Online, Zoom</td>
<td>9:30 a.m.</td>
<td>$325</td>
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You must have an email account to register online.


2. **Search for your class** by entering either a **key word** in the title or the **course number**. Click **Submit**. (Enter information in only one field for broader results.)
   
   Key Word Example: *Driver*
   
   Course Number Example: *TRAN-3398*

3. **Select the course** for which you wish to register. Click **Submit**.

4. Enter your **personal information, certify your identification** and click **Submit**.
   
   * You must provide your Social Security Number.

5. **Optional:** Enter your **Additional Registration Information** and click **Submit**.

6. If you want to register for additional classes, select **Search for more classes** under “Choose one of the following.” If you are finished selecting the class(es) for which you want to register, select **Register now (check out)**. Select your **Payment Type**. Click **Submit**.

7. Enter your **payment information**. Click **Submit**.

You will see your **class acknowledgement** with information about your **SCC Student ID Number, SCC User ID** and **password**. **Print** this page for your records.

In the future it will be easy to register by logging in using your SCC User ID and password and it will not be necessary to provide your Social Security number again.

If you have problems getting registered, please call 402-437-2700 or 800-828-0072 for assistance.