

Brain Injury Awareness

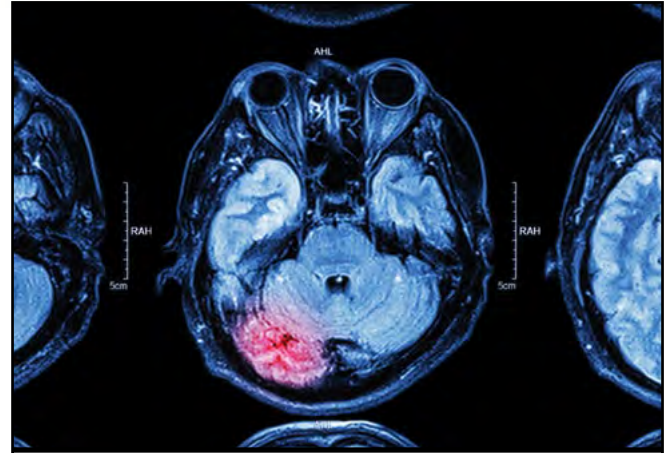
We are calling on you to use your brain and expertise to access and treat those with brain injury. Healthcare providers can provide appropriate and timely interventions for people with brain injury and others at risk. We will discuss screening tools to identify possible brain injury and identify community resources that can aid those suffering.

Presenters:

- **Peggy Reisher**, MSW, Executive Director
Brain Injury Alliance of Nebraska
- **Gina Simanek**, MA, LMHP, Resource Facilitator
Brain Injury Alliance of Nebraska
- **Matthew Garlinghouse**, PhD, Assistant Professor
Dept. of Neurological Sciences Neuropsychology – UNMC
- **Samantha Bohl**, OD, Optometrist
Madonna Rehabilitation Hospital

4.0 contact hours awarded to nurses. For other health care professionals, check with your licensing agencies to verify that this workshop will count as continuing education in your field. Participants must attend the entire conference and submit evaluation to receive credit.

Southeast Community College is approved as a provider of nursing continuing professional development by Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.



Friday, Aug. 12, 2022
8 a.m.-12:30 p.m. (Check-in begins at 7:30 a.m.)
LIVE Online via Zoom
Early Bird \$49 (on/before July 29)
\$69 (after July 29)
 Register today at <http://bit.ly/RegisterCE>
 Online Registration Keyword: Brain
 A Zoom link will be emailed out the week before the conference to all registered. Must have a valid email address.



For more information, contact us at continuinged@southeast.edu • 402-437-2700 • 800-828-0072

Cancellation/Refund Policy: You must call the Continuing Education office at 402-437-2700 or 800-828-0072 the day before the class begins to receive a 100% refund. If you call the day of the class or after it has started, no refund will be issued. 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. **ADA Reasonable Accommodations:** SCC provides services and reasonable accommodations to allow persons with disabilities to participate in educational programs and other College activities. For information on requesting ADA reasonable accommodations, contact the SCC Area Access/Equity/Diversity 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**
FAX: 402-437-2703

The College requests, but does not require, a student provide their Social Security number during the admissions process. Visit southeast.edu/collegecatalog for additional information.

Today's Date

Social Security Number OR SCC Student ID Number		Name: Last		First	Middle Initial	Email Address	
Residence Mailing Address			City	State	Zip	County #	<input type="checkbox"/> Cell <input type="checkbox"/> Business Phone
Birth Date	Identify as: <input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity (select one): <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Race (select one or more): <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> American Indian or Alaska Native		<input type="checkbox"/> Asian <input type="checkbox"/> Black or African American	<input type="checkbox"/> NE Resident <input type="checkbox"/> Non-Resident	Home Phone

Brain Injury Awareness

Aug. 12, 2022 • 8 a.m.-12:30 p.m. • Course #: NURS-3266

Please check	Early Bird • \$49 (on/before July 29)	After July 29 • \$69
	<input type="checkbox"/> LIVE Online via Zoom (Sec. TCUCA)	<input type="checkbox"/> LIVE Online via Zoom (Sec. TCUCB)

SIGNATURE

Check Cash Mastercard AMEX Discover VISA V Code _____

Name as it appears on card: _____

Exp. Date _____ CC # _____

Billing agency (INCLUDE LETTER OF AUTHORIZATION ON COMPANY LETTERHEAD)

For the protection of your personal credit card information, do not email this form to SCC. If faxing, only use the fax number listed or verify with SCC before using another SCC fax number.

Would you like a receipt mailed to you? <input type="checkbox"/> Yes <input type="checkbox"/> No	SCC Staff Tuition Waiver ()	FOR OFFICE USE ONLY
TOTAL DUE		ID# _____ DE _____

Submission of this form indicates that I understand: 1) that my registration is complete and that I am accountable for the tuition and fees and subject to a grade in the courses listed; 2) that should I officially drop, cancel, or withdraw, any refund in tuition will be determined by the date I submit my request to Continuing Education; 3) that failure to attend a course does not constitute an official drop/withdrawal; 4) the personal information contained herein is correct as shown; and 5) any changes in SSN, legal name, address, residency, etc. must follow the College procedures in the Student Handbook and College Catalog. SCC is an Equal-Opportunity co-educational college and does not discriminate based on race, color, religion, sex*, age, marital status, national origin, ethnicity, veteran status, sexual orientation, disability, or other factors prohibited by law or college policy. southeast.edu/diversity * The U.S. Department of Education's Sexual Orientation, Gender Identity, and Expression Non-Discrimination Act (SOGIE) prohibits discrimination on the basis of sex to also include discrimination based on gender identity.

Register Online for SCC Continuing Education Classes

You must have an email account to register online.

1. Go to <http://bit.ly/RegisterCE>.
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.



301 S. 68th St. Place, Lincoln, NE 68510
402-437-2700 • 800-828-0072 • FAX 402-437-2703
southeast.edu/continuing

* The College requires a student's Social Security number as a condition for enrollment. A student's Social Security number information constitutes an "educational record" under FERPA.