

**MANDT REGISTRATION FORM**  
Department of Special Education  
Lincoln Public Schools

**FILL OUT AND RETURN TO ANNA AT LPSDO, BOX 43 OR E-MAIL [ameza@lps.org](mailto:ameza@lps.org)**

Name \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_ Position \_\_\_\_\_

(Please check one)     Certification     Recertification

Will you need to request a sub?     Yes     No

First choice of date(s) \_\_\_\_\_ , \_\_\_\_\_

Second choice of date(s) \_\_\_\_\_ , \_\_\_\_\_

In case of first choice of date(s) is full

Administrator's signature \_\_\_\_\_

\*\*Certification takes two days of training and recertification one day

You will receive confirmation about 2-3 weeks before the beginning of the session.

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