□St. Thomas Campus

☐St. Croix Campus

<u>UVI Center for the Study of Spirituality and Professionalism (CSAP)</u> <u>ETHICS WORKSHOP REGISTRATION FORM</u>

"BUILDING A CULTURE OF ETHICS: DIMENSIONS AND STRATEGIES"

Title	□Dr.	\Box Prof	□Ms.	\square Mrs.	□Mr.		
Last Name			Firs	et Name & MI			
Affiliation:							
Address:							
Street			City	State	Zip Code		
Phone #:			Alt.	Phone #:			
Email:				Website Address:			
	ON FEE: \$75						
PAYMENT							
□My Check n	nade payable	to the University	of the Virgin Isla	ands is enclosed.			
□CREDIT CAR	dD: □Visa	ı [□Master Card	\Box AMEX			
Name (as it a	ppears on you	r credit card)					
Address (if di	fferent from a	above)					
Credit Card #:				Expiration I	Expiration Date:		
Signature:				Date:	Date:		
,	D1		c 1.c	9 9 4 4 11	1 1		

Please print and complete this form and fax, mail or email to the address below.

~~~

University of the Virgin Islands
Center for the Study of Spirituality and Professionalism (CSAP)
Office of the President
#2 John Brewers Bay ~ St. Thomas, V.I. 00802

#2 John Brewers Bay ~ St. Thomas, V.I. 00802 (340) 693-1240 (0) / (340) 693-1005 (F)

Email: <u>csap@live.uvi.edu</u> / <u>wendy.coram@live.uvi.edu</u> www.uvi.edu