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Workforce Development & Continuing Education

**Instituto Hispano de
Negocios y Entrenamiento**

Summer

2019

**Instituto Hispano de Negocios y Entrenamiento presenta:
SEMINARIO DE NEGOCIOS**



Recursos y Oportunidades para el Exito de su Negocio!

Este curso esta orientado para emprendedores y dueños de negocio que desean tips para lograr negocios mas exitosos, asi como conocer mas sobre los recursos y oportunidades existentes que pueden apoyar el desarrollo de su empresa. Podra escuchar importantes consejos, vivencias, experiencias y dificultades de un grupo de exitosos empresarios Latinos.

REGISTRESE HOY!!

Algunos temas a presentar:

Curso: HBI128
\$15 fee= \$15;
Non-MD residents add \$30

Rockville Campus, TA156
CRN#: 14908
8/31 Sabado
1 Session
8:30 a.m.-1:30 p.m.

- * **Servicio al cliente**
- * **Uso de tecnologia en su negocio**
- * **Oportunidades para hacer crecer tu negocio**
- * **Relaciones entre empresa y el sistema bancario**

Para más información, mande un email:
InstitutoHispano@montgomerycollege.edu,
o llame 240-567-5188

<http://cms.montgomerycollege.edu/wdce/bits/institutohispano.html>

Please Print Clearly



**MONTGOMERY
COLLEGE**

All information is required. Incomplete forms will be returned to the student unprocessed. For registration assistance call 240-567-5188.

FAX completed registration form with credit card information to 240-567-1877 or 240-567-5615 or 240-567-7937.

Mail completed registration form with payment to WD&CE Registration, 51 Mannakee Street, CC 220, Rockville, MD 20850.

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Have you attended MC before? ☐Yes ☐No

If you have ever taken a credit class at MC and the last class (credit or non-credit) you took at MC was more than 4 years ago, you must also complete and submit a Student Reactivation form found at: <http://www.montgomerycollege.edu/studentforms>.

How did you hear about us? ☐Received brochure in mail ☐Website ☐Social media ☐Advertisement ☐On campus ☐Other_____

Military: If the military is paying for your course(s), you must submit the last 4 digits of your SSN.

STUDENTS WITH DISABILITIES

If you need support services due to a disability, call Workforce Development & Continuing Education at 240-567-4118 at least three weeks before class begins.

ETHNICITY: Choose one. *(Disclosure not mandatory by Montgomery College, but is required by the U.S. Department of Education.)*

☐ Not Hispanic or Latino ☐ Hispanic or Latino

RACE: Choose all that apply, you may choose more than one. *(Disclosure not mandatory by Montgomery College, but is required by the U.S. Department of Education.)*

☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian and other Pacific Islander ☐ White

☐ U.S. Citizen ☐ Permanent Resident (**Circle one: Green Card / Working Card**) ☐ Other Immigration Status _____ (Used for tuition-setting purposes only.)

CHECK ALL THAT APPLY:

☐ I have been a Maryland resident [as defined in the *Montgomery College Catalog*] for at least three months.

☐ I am 60 years of age or older. (Applicable to designated tuition waiver courses for Maryland residents only.)

☐ I am a Maryland National Guard member enlisted for at least a 24 month period and submitting proof of such from the adjutant general's office.

| CRN # | Course # | Course Title | Start Date | Tuition | Course Fee | Non-Md. Fee | Course Total |
|----------|--|--------------|------------|---------|------------|-------------|--------------|
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| Code: GT | <i>Refunds will go to the registered student of record.</i> | | | | | Total Due | \$ |

I certify that the information on this registration is correct and complete. I am aware of and will adhere to College policies as published in the Student Handbook.

I understand that non-attendance and/or failure to file all registration changes in writing with the Admissions and Records Office does not relieve me of responsibility for tuition and fee charges incurred. I agree to abide by the policies and procedures of the College, including without limitation, the Student Code of Conduct and any payment liabilities. I hold the College harmless for any errors I have made that may affect a request for a subsequent refund or academic appeal.

Student Signature Required

Date _____

Please indicate payment by: ☐ **Check** (payable to Montgomery College)

Credit card: ☐ MasterCard ☐ VISA ☐ Discover

Credit Card Information: Expiration date on card / 3 or 4 digit Security code on your card

NOTE:
Credit card information will be detached and disposed of promptly and properly after payment is approved.

Credit Card Number

Name on Card

Card holder signature required _____ Date _____