



**MONTVILLE TOWNSHIP
PUBLIC LIBRARY**
90 Horseneck Road, Montville, NJ 07045
Attn: Vince Sacco 973-402-0900 x 243
www.montvillelib.org

APPLICATION FOR COMPUTER TRAINING

- PAYMENT - Payment must accompany this form and may be dropped off at the Circulation Desk or mailed to above address.
- NO REFUNDS - However if the library cancels a class, the tuition fee will be refunded.
- SCHEDULING - Instructor Vince Sacco will contact you for scheduling.

FIRST & LAST NAME (PRINT CLEARLY): _____

ADDRESS: _____

LIBRARY CARD # IF MONTVILLE RESIDENT: _____

PHONE: _____ E-MAIL (PRINT CLEARLY): _____

• Have you had any experience with a typewriter or computer keyboard? Yes No
If yes, please describe: _____

• Have you have any experience using a mouse? Yes No
If yes, please describe: _____

• Have you had any experience using a computer? Yes No
If yes, please describe: _____

- COURSES OF INTEREST (Please limit your choice to no more than 3 of the following):
- | | | |
|--|---|---|
| <input type="checkbox"/> Basic Microsoft MS Word | <input type="checkbox"/> Intermediate MS Word | <input type="checkbox"/> Advanced MS Word |
| <input type="checkbox"/> Basic Excel | <input type="checkbox"/> Intermediate Excel | <input type="checkbox"/> Advanced Excel |
| <input type="checkbox"/> Internet/E-mail | <input type="checkbox"/> Searching the Web | |

• PREFERRED TIME TO ATTEND THE COURSE:

<input type="checkbox"/> 10:00 am – Noon	<input type="checkbox"/> 6:00 pm – 8:00 pm	<input type="checkbox"/> No Preference
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• What is your primary purpose for taking the computer courses?

SIGNATURE: _____ DATE: _____

BELOW FOR LIBRARY STAFF ONLY:

- CHECK ONE: MONTVILLE SENIOR CITIZEN FREE – NO CHARGE
MONTVILLE RESIDENT \$10.00 per session
NON-MONTVILLE RESIDENT \$20.00 per session

PAYMENT AMT. RECEIVED \$ _____ CHECK CASH Library Staff Initials _____