



United States Office of Government Ethics  
**REGISTRATION FORM**  
**Washington, DC Intermediate Ethics Courses**

Registrant's Name: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax No.: \_\_\_\_\_  
 E-Mail address: \_\_\_\_\_

Please register me for selected courses (choose **ALL** or specify which **ones**):

**I plan to attend ALL the following Intermediate Courses**

- Tue, Mar 9 Intermediate Post Employment 9:00 a.m. - 12:00 noon
- Wed, Mar 10 Intermediate 18 U.S.C. § 208 9:00 a.m. - 12:00 noon
- Wed, Mar 10 Exemptions and Waivers Pursuant to 18 U.S.C. § 208 1:00 p.m. - 4:00 p.m.

LOCATION: Department of Labor  
 Conference Center C5320, Room 6 (5th Floor)  
 200 Constitution Avenue, NW.  
 Washington, DC 20201 (Metro stop: Judiciary Square)  
 202-219-7773

**PLEASE FAX THIS FORM TO: Sheila Powers, 202-208-8039**

**REGISTRATION DEADLINE: Wed, March 3, 1999.** Please contact Sheila Powers at 202-208-8000, x1104, if you must cancel.

PARTICIPANT INFORMATION (check appropriate items):

JOB SERIES:  Attorney  Personnel  Mgmt Analyst  Other: \_\_\_\_\_

ETHICS RESPONSIBILITIES:

- Written Opinions/Counseling  Financial disclosure process
- Training  Administrative actions
- Evaluation of ethics program  Agency reports to OGE

LENGTH OF TIME IN ETHICS AREA: \_\_\_ years PERCENT OF TIME SPENT IN ETHICS AREA: \_\_\_%

**FOR OGE USE ONLY**

REGISTRATION CONFIRMED:  YES  NO (Sorry, class full)

COMMENTS: \_\_\_\_\_

(OGE Official) SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_