



**DELBERT HOSEMANN**  
*Secretary of State*

**PRE-REGISTRATION FORM**  
**SEMS Advanced Training**

*PLEASE PRINT*

*Please fill out one form for each training participant.*

*One person from the Election Commission and one person from the Circuit Clerk's office may attend.*

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

COUNTY: \_\_\_\_\_

PHONE: \_\_\_\_\_ SECONDARY PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**PLEASE CHECK ONE OF THE FOLLOWING TITLES WHICH BEST DESCRIBES YOUR POSITION/TITLE:**

\_\_\_\_\_ **County Election Commissioner**

\_\_\_\_\_ **Circuit Clerk**

\_\_\_\_\_ **OTHER "Please specify"** \_\_\_\_\_

**PLEASE CHECK THE BLANK BY THE TRAINING SESSION YOU WISH TO ATTEND:**

\_\_\_\_\_ **February 8**                      \_\_\_\_\_ **February 14**

\_\_\_\_\_ **February 9**                      \_\_\_\_\_ **February 15**

\_\_\_\_\_ **February 10**                      \_\_\_\_\_ **February 16**

\_\_\_\_\_ **February 11**                      \_\_\_\_\_ **February 17**

\_\_\_\_\_ **February 18**

**All classes will be from 9:00am – 4:00pm**

**at the**

**MISSISSIPPI SECRETARY OF STATE'S OFFICE TRAINING ROOM**  
**401 Mississippi Street, Jackson, MS**

**Materials for the session must be brought by the participant.**

**\*PRE-REGISTRATION DUE BY: JANUARY 31, 2011\***

Please return this form to:  
Amanda Frusha  
MS Secretary of State's Office  
Post Office Box 136  
Jackson, MS 39205-0136  
Amanda.Frusha@sos.ms.gov  
**(601) 359-5213 or 1-800-829-6786**  
**FAX (601) 359-1499**