

OAKLAND COUNTY INFORMATION TECHNOLOGY
Element K Online Software Training Registration Form

User Name: _____ **Department:** _____ **Phone:** _____

Please explain why you are unable to attend regular scheduled computer training at the Information Technology Training Center.

Please check the classes you are interested in taking through Element K. If you are requesting training manuals, please check the manual box next to the appropriate class.

WORD PROCESSING

| Word 2002 (XP) | Manual |
|-----------------------|---------------|
| Level 1 | |
| Level 2 | |
| Level 3 | |

SPREADSHEETS

| Excel 2002 (XP) | Manual |
|------------------------|---------------|
| Level 1 | |
| Level 2 | |
| Level 3 | |

DATABASE

| Access 2002 (XP) | Manual |
|-------------------------|---------------|
| Level 1 | |
| Level 2 | |
| Level 3 | |
| Level 4 | |

PRESENTATION

| PowerPoint 2002 (XP) | Manual |
|-----------------------------|---------------|
| Level 1 | |
| Level 2 | |

WINDOWS

| Windows XP | Manual |
|-------------------|---------------|
| Level 1 | |

ADOBE

| Acrobat 6.0 | Manual | Acrobat 7.0 | Manual |
|--------------------|---------------|--------------------|---------------|
| Introduction | | Level 1 | |
| Level 2 | | Level 2 | |

| Acrobat 8.0 | Manual | Acrobat 9.0 | Manual |
|--------------------|---------------|--------------------|---------------|
| Level 1 | | Level 1 | |
| Level 2 | | Level 2 | |

ELECTRONIC MAIL / INTERNET

| Outlook 2002 (XP) | Manual | Internet Explorer | Manual |
|--------------------------|---------------|--------------------------|---------------|
| Level 1 | | 6.0: Introduction | |

Student Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

**PLEASE COMPLETE THIS FORM AND RETURN TO JEMARICE SIMPSON AT THE
 INFORMATION TECHNOLOGY TRAINING CENTER. FAX NUMBER 248-858-1006.**