trainND Northeast

Lake Region State College

Medication Assistant II (North Dakota)
Medication Administration for Unlicensed Personnel Course (Minnesota)
Individual Registration Form

Course Starting Date: _____ Location:_____

Name _____ CNA Registry # _____

Address _____

City _____ State_____ Zip _____

Telephone _____ Date of Birth _____

Email _____

Employer _____ Occupation _____

MINNESOTA REGISTRANTS: Must include proof of completion of a Minnesota Nurse Assistant Training program with registration.

Verification of current status on the Minnesota or North Dakota (CNA) Nursing Assistant Registry must accompany this registration form.

FEE: $1,095.00 – Register early and receive our early bird rate of $995.00 by paying prior to May 4, 2027! Payment MUST be received in our office by this date to receive this rate.

Return this registration form, NA registry/course completion verification and course fee prior to May 15, 2027 to:

MAIL:	**IN PERSON:**	**EMAIL:**
Lake Region State College Attn: TrainND Northeast 1801 College Dr N Devils Lake, ND 58301	TrainND Northeast Lake Region State College 1801 College Dr N Devils Lake, ND 58301 Bergstrom Technical Center, Door 14	LRSC.trainnd@LRSC.edu **FAX:** (701) 665-4670

METHOD OF PAYMENT:

_____ Check or money order enclosed *(payable to LRSC)*

_____ Credit card payment Visa, MasterCard, American Express or Discover
(call TrainND at 701-662-1578 with card number)

For information or questions: (701) 662-1578 or LRSC.trainnd@LRSC.edu