Strategies for Success Trumba: Registration Aid

| 1. Open <u>www.WorkSourceWa</u> | i.com | | | |
|---------------------------------|--|--|---|--|
| | | | | |
| https://www.worksourcev | va.com/ | | 5 a + Q | |
| Edit View Favorites Tools | Help | | | |
| | - | Search thousands of | of jobs on WorkSource Washington: | |
| Work | Source | Title, keyword o | or job number | |
| My WorkSource | Career tools | Resources | About us 🐨 | |
| | 1 | 100 | il co | |
| 2. Select Career tools and Wor | kshops | | | |
| | Wy WorkSource - C | arcertoois ··································· | cco « About uo « | |
| | Workshops c | and hiring ev | ents | |
| | Workshops | Hiring events | | |
| | Select an area to see worl | kshop schedules and loca | ations: | |
| | All WorkSource locations | | | |
| 3. Select Location | Puget Sound Area | | | |
| | Snohomish County Seattle-King County Pierce County | | | |
| | Northwest Washington | | | |
| | Bellogham Mount Verno | n Oak Harbor Bremert | on Port Angeles Port Hadlock Port Orchard | |
| | Southwest Washington | | | |
| | Chehalis Grays Harbor | Kelso) ong Beach Oly | mpia Raymond Shelton Vancouver | |
| | Central Washington | | | |
| | | officiary outproved we | | |
| | Colville Kennewick Pull | man Spokane Walla W | /alla | |

SFS Trumba: Registration Aid



Please note: If the "sign up" button is grayed out, the workshop is full

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| Event Actions powered by T | rumba - Windows Internet Explorer provid | ed by Employment Security Department |
|--|---|--|
| https://eventactions.com/e | areg.aspx?ea=Rsvp | |
| WorkSource | | |
| Sign In: Facebook | 8+ Google Live | Benefits of Signin |
| EVENT REGISTRATION | | |
| Send your response to the | event organizer by entering your person | |
| Send your response to the | | an mormation, choosing your response and pressing on. |
| WHERE | 305 S. Pacific Ave. Ste B | In the attendee name, put |
| | Kelso, WA 98632 | the client's last name and |
| ROOM | 1B Tammi Loclorc | the client's last hame and |
| | 360-600-8833 | the CSO number |
| CONTACT FMAIL | tleclerc@esd.wa.gov | |
| | English | |
| ADDITIONAL INFORMATION | Go to worksourcewa com anal reate v | your account prior to attending this workshop |
| | Sign Up Required | our account phor to attending this workshop. |
| | Registration for the course requires a | referral from the Department of Social and Health Services |
| LYENT DETAILS | Title: Comparison of Civingent in | referrar for the beparatient of bodar and real riservices. |
| | This compared uses topics for some | numity and citizonship |
| | The Burse introduces topics for comin | hunity and cluzenship. |
| WHEN | Tuesday, February 21, 8:30am – Friday | , February 24, 2017, 1:30pm PST |
| Attendee name: | | |
| Leclerc CSO008 | * | |
| Aucados omail address: | | |
| tleclerc@esd wa dov | (0 | ntional) |
| Note: Name and email address v | vill be shared with the event organizer. | pronaly |
| Note: If you don't provide at | email address, you won't receive confirma | tion |
| reminder, or change notifica | ation email messages. | uon, |
| | | |
| Aiready registered? Sign | in with the same account you used to re | gister or click update registration. |
| Attendee Last Name | | |
| | | |

SFS Trumba: Registration Aid

| 8. Enter the | rest of the atte | endees information |
|---------------|---|---|
| | WHEN | Tuesday, February 21, 8:30am – Friday, February 24, 2017, 1:30pm PST |
| | Attendee name: | |
| L | Leclerc CSO008 | * |
| | Attendec email a | ddress: |
| | tleclerc@esd.wa. Note: Name and em | .gov (optional) nail address will be shared with the event organizer. |
| | Note: lf you don't reminder, or chai | : provide an email address, you won't receive confirmation, nge notification email messages. |
| | Already regist | <i>tered</i> ?Sign in with the same account you used to register or click update registration. |
| | Attendee Last Nar Leclerc | * |
| | Attendee First Na | me |
| | Tammi | * |
| | Have you (or are y ○Yes | ou the spouse of a person who) served in the U.S. Military Service? |
| | Email Address | |
| | tleclerc@esd.wa | .gov |
| | Phone Number | |
| | 360-600-8833 | |
| | For Office Use Or | nly |
| | Sign up performed | a by |
| | | ~ |
| | Below are addition | onal calendar options |
| - | lf the event date | , time, location, or description changes, you'll receive an email update |
| | 🗌 Email me a re | minder 15 minutes 💙 before each event listed above |
| | Overwrite Pre | vious Response since I have already registered for this event |
| | | |
| (| ✓ок | Ever ((t- |
| | | Registration is complete and an email is generated to the SES Instructor |
| 9. Click "OK" | | letting them know the registration is available to view. |
| | - | The participant will need to be registered for each |
| | | workshop they will be attending. |