Welcome to Medicare

Medicare can be a complicated topic. Worse yet, misinformation can lead to decisions that may result in penalties and a delay of benefits. In order to avoid mistakes, you are invited to learn about the basics of Medicare and what you need to consider as you approach Medicare eligibility.

The Nebraska State Health Insurance Program will cover the cost of this course. *Visit doi.nebraska.gov/ship to register.* Call 402-471-2841 with questions. Registration deadline is one week prior to class date.

Students meet at Learning Centers. Instructor is via Zoom.

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REGISTERONLINE

You must have an email account to register online.

- Go to http://bit.ly/RegisterCE
- Search for your class by entering a key word in the title or the course number. Click Submit. (Enter information in only one eld for broader results.)

Key Word Example: Driver

Course Number Example: TRAN-3398

- 3. Select the course for which you wish to register. Click Submit.
- Enter your personal information, certify your identi cation and click Submit.
 You must provide your Social Security Number.
- Optional: Enter your Additional Registration Information and click Submit.

- If you want to register for additional classes, select Search for more classes under "Choose one of the f ollowing." If you are nished selecting the class(es) for which you want to register, select Register now (check out).
 Select your Payment Type. Click Submit.
- 7. Enter your payment information. Click Submit.

You will see your class acknowledgement with information about your SCC Student ID Number, SCC User ID and password. Print this page for your records.

In the future it will be easy to register by logging in using your SCC User ID and password and it will not be necessary to provide your Social Security number again.

If you have problems getting registered, please call 402-437-2700 or 800-828-0072 for assistance.

OR REGISTERBY MAIL, FAX OR IN PERSON

Registration Form - Non-Credit Course

COURSE NUMBER	TITLE	START DATE	COST
			\$
			\$
			\$

Submission of this form indicates that I understand: 1) that my registration is complete and that I am accountable for the tuition and fees and subject to a

%Check (must be included) (Checks may be converted into an electronic fund transfer, resulting in funds being held or removed immediately.)						
‰\	<u>′</u> ‰U	%H	V Code			
Name as it appears on card:						
Exp.DateCC #						
For the protection of your personal credit card information, do not email this form to SCC. If faxing, only use the fax number listed or verify with SCC before using another SCC fax number.						

^{*} The College requires a student's Social Security number as a condition for enrollment online. A student's Social Security number information constitutes an "educational record" under FERPA.