Computer Technologies Program Referral Form

Consumer	Referring Counselor
Name _____	Name _____
Phone _____	Phone _____
Email _____	Email _____

Consumer Information

Training Program(s) Desired

☐ Introductory Computer Classes   ☐ Office Admin. training

☐ Customer Service Training   ☐ Computer Technician Training

Employment Goal _____

Disability(s) (including Learning Disabilities)

Other barriers to employment

Accommodations needed

Please Return to

Computer Technologies Program
3075 Adeline St Suite 240, Berkeley, CA 94703
510-849-2911 ext. 4003 / 510-849-2968 Fax
admissions@ctpberk.org

Did you know CTP sells computers?