REGISTRATION FORM

2015-2016 5310 Enhanced Mobility of Seniors and Individuals with Disabilities and 5311 Rural Areas Programs
Grant Application Workshop
January 14, 2015

Jackson State University- E-Center
1230 Raymond Rd
Jackson, MS 39204

(Two attendees per agency/organization)

_____
Name (please print or type)

_____
Name (please print or type)

_____
Title

_____
Full Organization Name

_____
Full Organization Mailing Address

_____
City, State Zip Code

_____
Organization Phone # FAX #

_____
Participant's E-mail Address

Check if New Prospective Applicant _____
I'm Interested in applying for 5310 Funds _____
I'm interested in applying for 5311 Funds _____

Please return the completed registration form by fax at (601) 359-7777, email at devans@mdot.ms.gov, or mail to MDOT-Public Transit Division, Mail Code 61-01, P.O. Box 1850, Jackson, MS 39215, **no later than Wednesday, January 7, 2015.**

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