



Do You Want to Become a United States Citizen?

**ENGLISH/CITIZENSHIP CLASSES TO PREPARE FOR THE
NATURALIZATION EXAM AND HELP WITH N-400 FORM!**

- We can accept up to 15 students only
- Fee: \$25
- Bring your Green Card

WHERE:

FilCom Office Conference Room 302
94-428 Mokuola St.
Waipahu, Hawaii 96797

SESSION DATES AND TIME:

Saturdays • September 9, 16, 23 & 30
1:00 p.m – 3:00 p.m



INSTRUCTOR:

Gwen Navarrete Klapperich, CPLP® is Chief Learning Consultant of Klapperich International Training Associates (KITA) LLC, a family owned consulting firm that specializes in offering small businesses and nonprofit organizations affordable training & development and performance improvement solutions. She holds over 15 years of experience in training & development, customer service supervision, and quality assurance initiatives, and has worked in various industries such as retail, call centers, healthcare, government, hospitality, nonprofits, and continuing education. Gwen earned her CPLP® (Certified Professional in Learning and Performance) from the Association of Talent Development in 2014, and has dedicated her career to helping adult learners reach their professional goals through effective job training.

Contact for questions:

For more information, visit www.filcom.org or call (808) 680-0451



The Filipino Community Center, Inc.
94-428 Mokuola Street, Suite 302 Waipahu, Hawaii 96797
Phone: (808) 680-0451 | Fax: (808) 680-7510
Email: filcom@filcom.org | Website: www.filcom.org

REGISTRATION FORM
U.S. CITIZENSHIP CLASSES
September 9,16,23 & 30, 2017

Name: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Work: _____

Email Address: _____

Country of Origin: _____ Date of Arrival in the U.S.A.: _____

Emergency Contact: _____ Home: _____ Cell: _____

ACCIDENTAL, MEDICAL AND MEDIA RELEASE

I hereby release the FilCom Center their officers, directors, employees and all other sponsoring agencies and/or organizations of any claim for damages, liability, injury, expense, or loss on account of negligence or other wrong doing that may occur while I am attending all or part of the program activities.

I also agree to indemnify and hold harmless those persons of the above stated organizations on any claim arising out of this agreement.

I also hereby give permission to film, tape, or otherwise record my voice and/or person. I understand that these recordings may include news releases to include photographs and other media releases about the program.

I have read this agreement, waiver and release and agree to and accept the terms.

Signature

Date

Registration Fee: **\$25.00** Cash _____ Check _____ Receipt# _____

Checks payable to: **FilCom Center**

Received by: _____ Date: _____

Our Mission

"To develop, own and operate a community center that provides social, economic, and education services, and to promote and perpetuate Filipino culture and customs in the State of Hawaii."