## PIMA COUNTY CONSOLIDATED JUSTICE COURT COJET REGISTRATION FORM

|            | Last Name:   | First Name:        |
|------------|--------------|--------------------|
|            | Job Title:   | Court Affiliation: |
|            | Course Name: | Date:              |
| #          | Course Time: | Location:          |
| Course #1  | Email:       |                    |
| Lost Name: |              |                    |
|            | Last Name:   | First Name:        |
|            | Job Title:   | Court Affiliation: |
|            | Course Name: | Date:              |
| e #2       | Course Time: | Location:          |
| Course #2  | Email:       |                    |
|            | Last Name:   | First Name:        |
|            | Last Name.   | Tilst Name.        |
|            | Job Title:   | Court Affiliation: |
|            | Course Name: | Date:              |
| #3         | Course Time: | Location:          |
| Course #3  | Email:       | -                  |