Type Course Name, matching course title will auto-populate
Click on magnify image button
Select a training modality
1. Classroom training is traditional in class (go to page 4)
2. Live virtual class: learn with instructor teaching in real time over the PC (go to page 5)
3. Self-paced: Self-study Kit (go to page 6)
Click on shopping cart for the desired scheduled class.
Click on shopping cart for the desired scheduled class.
Click on shopping cart for the desired scheduled class
New users please sign up for an Oracle Account (go to page 8)

Existing users fill in your username and password (go to page 9)
Dots are required fields

**MyProfile - Create Account**

Please provide the following information to create your Oracle.com account and also indicate your e-mail communication preferences.

Your Oracle.com account gives you access to a variety of online application and services like Oracle Store, My Oracle Support, Marketing Events, and the Oracle PartnerNetwork. If you are registering for one of these services, you will be redirected if more information is needed to complete the process.

* Indicates required field

**Account Information**

<table>
<thead>
<tr>
<th>* E-mail</th>
<th>Please provide a valid e-mail address as your username. Your business e-mail address is preferred. Passwords must be a minimum of 8 characters and must contain both upper and lower case letters and at least one number.</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Password</td>
<td></td>
</tr>
<tr>
<td>* Confirm Password</td>
<td></td>
</tr>
</tbody>
</table>

**Information**

<table>
<thead>
<tr>
<th>* First Name (Given Name)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Middle Name</td>
<td></td>
</tr>
<tr>
<td>* Last Name</td>
<td></td>
</tr>
<tr>
<td>* Job Title</td>
<td></td>
</tr>
<tr>
<td>* Country</td>
<td>Please Select...</td>
</tr>
<tr>
<td>* State/Province</td>
<td>Please Select...</td>
</tr>
<tr>
<td>* City</td>
<td></td>
</tr>
<tr>
<td>* Company</td>
<td></td>
</tr>
<tr>
<td>* Address1</td>
<td></td>
</tr>
<tr>
<td>Address2</td>
<td></td>
</tr>
<tr>
<td>* Postal Code</td>
<td></td>
</tr>
<tr>
<td>* Business Phone</td>
<td></td>
</tr>
</tbody>
</table>

□ Yes, I'd like to become a member of the Oracle Technology Network (OTN)
□ Yes, I'd like to become a member of the Oracle C-Central Community
□ Yes, send me e-mails on Oracle Products, Services, and Events

To opt-out please click the Do Not E-mail link on the bottom of the page.

**Subscription Center**

You understand and agree that use of Oracle's web site is subject to the [Oracle.com Terms of Use](#) and [Oracle's Privacy Policy](#).
Select Corporate Employee if your company is paying for training (go to page 10)

Select OPN if you know your company’s OPN discount code otherwise select Corporate employee (go to page 11)
Enter education discount agreement or valid learning credit code. If you don’t have either, select No Agreement (go to page 12)
Enter your company’s OPN discount agreement or learning credit number
Fill in Details

Customer Details: Corporate

Customer Bill To Information

Enter or update the Billing Information as needed.

- Customer Number:
- Title: Select Title
- First Name: XXX
- Last Name: XXX
- Daytime Phone: [H] [H] [H] [H] [H] [H] [H]
- *Company:*
- *Country:*
- *Address:
- *Address2:
- *Address3:
- *Address4:
- *City:
- *State:*
- *Zip/Postal Code:
- *County:
- Communication Language: English

Customer Contact Information

Enter or update the Contact Information as needed.

- Title: Select Title
- First Name: XXX
- Last Name: XXX
- Daytime Phone: [H] [H] [H] [H] [H] [H] [H]
- *Company:
- *Country:*
- *Address:
- *Address2:
- *Address3:
- *Address4:
- *City:*
- *State:*
- *Zip/Postal Code:
- *County:
- Communication Language: English

Proceed to next step
Edit student info if you are buying this for someone else
1. Enter the student details for this student

- Customer Number:
  - Title: [Select Title]
  - First Name: [Enter Name]
  - Last Name: [Enter Name]
  - Daytime Phone: [Enter Phone]
  - Email: [Enter Email]
  - Communication Language: [Enter Language]

- Company: [Enter Company]
- Country: [Enter Country]
- Address: [Enter Address]
- City: [Enter City]
- State: [Enter State]
- Zip/Postal Code: [Enter Zip Code]
- County: [Enter County]

2. Assign this student to classes / products in your cart

- Select All / None

[Buttons: Cancel, Finish]
1. Enter the student details for this student

   - Customer Number: [Select & Copy]
   - First Name: ABCDE
   - Last Name: ABCDE
   - Daytime Phone: 1-555-555555
   - Email: ABCDE@ABCDE.com
   - Communication Language: English
   - Company: ABCDE
   - Country: United States
   - Address: ABCDE
   - City: ABCDE
   - State: CALIFORNIA
   - Zip/Postal Code: 90030
   - County: ABCDE

2. Assign this student to classes / products in your cart

   - Select All / None

   - Proceed to next step
Select payment type, if you entered a LC # in the customer details screen, go to next step
Payment Details

Please enter the payment details.

Learning Credits
- Commitment Number: [Input Field]

Education Discount Agreement Name: [Input Field]

Tax Information
- Is this order Tax Exempt?
  - No
  - Yes
- If your answer is "YES", please enter your Tax Exemption Certificate Number below.
  - Tax Exemption Certification Number: [Input Field]

Next Step: Proceed to next step.