



Service Technical Education Program (STEP) Enrollment Form

School must be accredited with the ASE Education Foundation to be eligible

School Information

School's Name: _____
 Street Address: _____
 City: _____
 State: _____
 Zip Code: _____

GM Dealer Information

Dealer Name: _____
 Street Address: _____
 Dealer BAC: _____
 City: _____
 State: _____
 Zip Code: _____

Instructor's Information

Instructor's Name: _____
 Phone #: _____
 Email: _____

Dealer Point of Contact (POC) Information

POC Name: _____
 POC GMIN: _____
 POC Email: _____
 POC Phone #: _____

ASE Education Foundation Representative Point of Contact (POC) Information

POC Name: _____
 POC Email: _____
 POC Phone #: _____

Zone Team Point of Contact (POC) Information

POC Name: _____
 POC Email: _____
 Zone: _____
 District: _____

Region	Field Technician Specialist	Email	Phone #
West	Airishae Cross	airishae.cross@gm.com	470-396-2353
South Central	TBD		
Southeast	TBD		
Northeast	Jeanette Rooney	jeanette.rooney@gm.com	860-488-5608
North Central	Hailey Lamay	hailey.lamay@gm.com	734-601-1397

Type in the required information, save the document, and email to your region's Field Technician Specialist identified in the table above.

(Handwritten forms will NOT be processed)