

SDSU Red ID (student identification number)

REGISTRATION FORM

Company Name Title

Date

Daytime telephone (include country code) Evening telephone (include country code)

Are you a current SDSU student?

E-mail address Date of Birth (month-day-year)

Yes No

Term you are registering for:

Last Name First Name M.I.

Spring Fall Summer Winter

Year: 2012

Address - Number and Street

Did you attend SDSU prior to 1987?

City State Zip Code Country

Yes No

Social Security Number *

Enter here any other name which you have used at SDSU

*necessary to create SDSU Student ID and for tax credit purposes

I am registering for the following courses:

Table with 7 columns: Schedule Number, Fees, Units, Dept/Course No., Course Title, Course Dates, Instructor Signature. Row 1: 12SP 80905 G, \$72, 1, ED 997, Common Core Standards, 4/16-5/2, N/A

and Assessment

Registration due: 04/25

Paper due: 05/02

MUST BE COMPLETED

This section must be completed to process your registration. How heard about program (check one option only):

- A. CES Catalog, B. Advertisement, C. Direct Mail, D. Returning CES Student, E. Recruited by Instructor, F. SDSU Student, G. Walk-in, H. Company Referral, I. Friend/Relative Referral, J. News Story in Paper/TV, K. Personally Recruited by CES Staff, L. SDSU Alumni, M. Other (please explain), N. Referred by Campus/other department/other school, O. Professional/Trade Association, P. Open University student, Q. Voicemail, R. Web (Internet), S. Email, T. Solution Tree

For information concerning special services to accommodate a physical, perceptual, or learning disability, please contact the Disabled Student Service office on the campus, (619) 594-6473.

I HAVE READ THE CLASS SCHEDULE, I UNDERSTAND AND AGREE TO ABIDE BY THE DEADLINES AND POLICIES GOVERNING THESE COURSES, AND I ACCEPT FULL ACADEMIC AND FINANCIAL RESPONSIBILITIES FOR EACH CLASS GRANTED.

Signature: Date:

CASHIER ONLY box with lines for signature and Total Fees

IMPORTANT Make checks payable to SDSU.

Agency/Company to be billed:

Payment by: Please note courses where payments are made to the SDSU Research Foundation do not accept AX or Discover.

Check/Money Order Mastercard Amer. Exp. Discover Visa (must attach PO or appropriate documentation)

Card Number Exp. Date

Print Cardholder's Name Cardholder's Signature

Mail to: College of Extended Studies Cashier, 5250 Campanile Drive San Diego State University, San Diego, CA 92182-1919