

OPEN UNIVERSITY REGISTRATION FORM

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CAMPUS I.D.

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SOCIAL SECURITY NUMBER

(New Student Only)

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LAST NAME

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FIRST NAME

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MI

Enter any other name you may have used at CSULB:

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Last Name

First Name

MI

Have you ever applied to CSULB before? ☐ Y (yes); ☐ N (no)Have you ever attended CSULB before? ☐ Y (yes); ☐ N (no)If yes, did you attend CSULB prior to Fall 1988? ☐ Y (yes); ☐ N (no)Enter the **last** term and year in which you attended a course offered by CSULB: _____

	ACTION ADD DROP		COURSE SUBJECT AND NUMBER	CLASS NUMBER	SECTION	UNITS	INSTRUCTOR SIGNATURE (see below)	ASSOCIATE DEAN APPROVAL (CBA only)
1.								
2.								
3.								
4.								

Address Apt. No.

City State ZIP

() ()

Cellular Other

Email Address Date of Birth: Month/Day/Year

Country of Citizenship

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Are you currently a disqualified CSULB student? ☐ Y (yes); ☐ N (no) Gender: _____Do you have a Bachelor's degree? ☐ Y (yes); ☐ N (no)

How did you hear about Open University?

OFFICE USE ONLY

☐ Before Change ☐ After ChangeCOURSE FEES: \$ _____ Input by:

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I.D. SERVICES FEE: \$ _____

INSTALLMENT PLAN FEE: \$ _____ PP:

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OTHER COURSE FEES: \$ _____

TOTAL FEES: \$ _____

Payment Method:

☐ Other _____☐ Check # _____☐ Credit Card # _____ Expiration Date _____ Security Code _____

Card Holder's Name _____ Authorizing Signature _____

HOW TO USE THIS FORM

Please refer to the CPACE Open University website at <https://www.cpace.csulb.edu/open-university> for detailed instructions on how to register for classes. The process is different depending on the college.

Questions? Please call (800) 963-2250 or (562) 985-5561 • cpace-info@csulb.edu

Hours: Monday through Thursday 8 am–5 pm, Fridays 9 am–5 pm

