

## Winter Sessions Registration Form

Year: \_\_\_\_\_

PLEASE PRINT

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**SOCIAL SECURITY NUMBER (NEW STUDENT ONLY)**

**CAMPUS I.D.** (Returning Student)

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LAST NAME

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FIRST NAME

MI

CLASS 1		CLASS 2		CLASS 3	
<input type="checkbox"/> Add	<input type="checkbox"/> Drop	<input type="checkbox"/> Add	<input type="checkbox"/> Drop	<input type="checkbox"/> Add	<input type="checkbox"/> Drop
CLASS #	COURSE	CLASS #	COURSE	CLASS #	COURSE
SECTION #	UNITS	SECTION #	UNITS	SECTION #	UNITS
APPROVAL SIGNATURE		APPROVAL SIGNATURE		APPROVAL SIGNATURE	
DATE		DATE		DATE	

SESSION  1  2

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Preferred Main Telephone \_\_\_\_\_ Other Telephone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_  
Month Day Year

- Have you ever been enrolled at CSULB? Yes  No
- If **yes**, did you attend **prior** to Fall 1988? Yes  No
- Do you have a Bachelor's degree? Yes  No
- Are you currently a disqualified student? Yes  No

Enter the term and year in which you **last** attended:

Term \_\_\_\_\_ / \_\_\_\_\_ Year \_\_\_\_\_

If no, **last** institution attended: \_\_\_\_\_

**COUNTRY OF CITIZENSHIP:**

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I understand that this enrollment does not constitute admission to the University. I have been advised of the registration procedures and understand the procedures on withdrawal and fee refund policy by the CPIE student services representative.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

**UNITS:**

Before Change

After Change

**FEES:**

Class 1 \$ \_\_\_\_\_

Class 2 \$ \_\_\_\_\_

Late Fee \$ \_\_\_\_\_

Payment Plan \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

**METHOD OF PAYMENT:**

Other \_\_\_\_\_

Check # \_\_\_\_\_

Credit Card

Credit Card No.: \_\_\_\_\_

Exp.Date: \_\_\_\_\_ / \_\_\_\_\_

Security Code: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**EXTRA UNITS PETITION RECEIVED**

**PAYMENT PLAN**

INITIALS

White – CPIE

Pink – Student