

Contract Credit Registration Form

California State University, East Bay
Continuing Education

To enroll for credit, please complete and return to instructor.

- Fees must be paid in full for enrollment to be valid
- Please provide complete information and print clearly-incomplete or illegible registrations are subject to delay. Thank you!

Student Information Please PRINT

Last Name First Name Middle Social Security #

Street Address

City State Zip _____
Month / Day / Year of Birth

(_____) _____ - _____ (_____) _____ - _____ _____
Day Phone Number Evening Phone Number Email

Records

Please sign and date this form to verify for official University records that the above information is accurate.

Signature _____ Date: ____ / ____ / ____

Ethnic Origin

- | | | |
|---|--|--|
| <input type="checkbox"/> 1-American Indian/Alaskan | <input type="checkbox"/> C-Chinese | <input type="checkbox"/> 5-Other Asian |
| <input type="checkbox"/> 2-Black, | <input type="checkbox"/> J-Japanese | <input type="checkbox"/> F-Filipino |
| <input type="checkbox"/> 7-White, | <input type="checkbox"/> K-Korean | <input type="checkbox"/> H-Hawaiian |
| <input type="checkbox"/> 3-Mexican-American, Mexican, | <input type="checkbox"/> L-Laotian | <input type="checkbox"/> G-Guamanian |
| <input type="checkbox"/> A-Central | <input type="checkbox"/> M-Cambodian | <input type="checkbox"/> N-Samoan |
| <input type="checkbox"/> B-South | <input type="checkbox"/> T-Thai | <input type="checkbox"/> 6-Other Pacific |
| <input type="checkbox"/> P-Puerto | <input type="checkbox"/> V-Vietnamese | <input type="checkbox"/> D-Declined to |
| <input type="checkbox"/> Q-Cuban | <input type="checkbox"/> R-Asian | <input type="checkbox"/> 9-No response |
| <input type="checkbox"/> 4-Other | <input type="checkbox"/> S-Other Southeast | <input type="checkbox"/> 8-Other |

Sex

- Female Male

Credential

Please check if you are pursuing a credential

- What type? Emergency
 Preliminary
 Clear

Credit/No Credit: To receive credit/no credit (CR/NC) for courses offering the option of CR/NC instead of a letter grade, indicate by checking the column at the right. A standard letter grade will be posted on your record unless you select this option.

Course Information

Quarter: _____

Year: _____

<u>Dept</u>	<u>Course #</u>	<u>Section</u>	<u>Course Title</u>	<u>Instructor</u>	<u>Units</u>	<u>Fee</u>	<u>CR/NC</u>
GS	6990	HA	Grad Study Completion	Bellone	1.0	\$54.00	

TOTAL: \$54.00

Payment Options Please check on box

- Personal Check/ Money
- Visa or MasterCard: _____ -- _____ -- _____ Expires: ____ / ____ / ____
- Cardholder Name: _____ SIGNATURE: _____
- Paid by employer: **Attach** either Employer Purchase Order or Company/Agency
- Employer: _____
- Address: _____
- City State, Zip: _____

Full payment must accompany this form
Make Checks Payable CSUEB

No refunds issued on contract registrations

For Office Use: Invoice Cash Check/MO #:

Staff Initials _____ and Date ____ / ____ / ____