

OPEN UNIVERSITY ADD/DROP FORM

Term: Fall Spring YEAR: 20____

____|____|____|____|____|____|____|____|____|____| NAME: _____
CHICO STATE ID NUMBER (IF AVAIL.) Last First M.I.

DOB: ____/____/____ GENDER: M F ADMITTED STUDENT? Yes No BENEFITTED CSU EMPLOYEE? Yes No CLASS LEVEL: Undergrad Grad / Post-bac
MM DD YY

ADDRESS: _____
Number Street Room or Apt. City State Zip

LOCAL PHONE: (____) ____-____ CELL PHONE: (____) ____-____ EMAIL: _____

Add Drop Add w/Time Conflict Add for Audit REG NUMBER: ____|____|____|____| CLASS: _____|_____|_____| UNITS: _____
Subject Number Section

SERIOUS AND COMPELLING REASON FOR LATE ADD/DROP: _____
See University Catalog for criteria used for evaluating a serious and compelling reason: <http://catalog.csuchico.edu/viewer/12/ACAREGS.html>

STUDENT ACKNOWLEDGEMENT: I understand that: 1) enrollment is not finalized until completed Add Form with all required signatures is submitted to Continuing Education with payment in full; 2) I am responsible for reading and understanding the deadline, refund policies, and late fees posted at rce.csuchico.edu/openu prior to enrollment; and 3) CSU, Chico will accept no more than 24 units of Open University coursework towards an undergraduate degree or 9 units towards a graduate degree. ***I acknowledge that I have reviewed these policies:***

Signature: _____ Date: _____

- SIGNATURES NEEDED:**
- Instructor signature required for all adds.
 - All adds under the College of Engineering or College of Business require dept. chair signature.
 - After 4th Friday of Term: instructor, dept. chair & dean • If you have been academically disqualified or denied admission, instructor, dept. chair and academic advisor signatures are all required at any time.
 - Visit Undergraduate Academic Advising in SSC 220 or Graduate Student Advising in SSC 460 for academic advisor signature.
 - Original signatures by applicable designees required. Please use ink. Signatures valid for 10 business days.

| | |
|-------------------------|---------------------------|
| OFFICE USE ONLY: | |
| √ Signatures _____ | Ref. Amt \$ _____ |
| Drop Code _____ | Late Fee (if req'd) _____ |
| Initials _____ | Date _____ |

INSTRUCTOR: _____
Print Name Signature Date

LAB INSTRUCTOR: _____
Print Name (If different than class instructor) Signature Date

DEPT. CHAIR: _____
Print Name Signature Date

ACADEMIC ADVISOR: _____
Print Name Signature Date

COLLEGE DEAN: _____
Print Name Signature Date

OPEN UNIVERSITY ELIGIBILITY & ENROLLMENT REQUIREMENTS

This information must be completed once per term. If enrolling in more than one class in a term, you only need to complete it once.

A. All Students Must Complete The Following Section:

- Are you currently admitted or authorized to enroll as a CSU, Chico student? Yes No (If yes, you are not eligible to enroll through Open University.)
- Did you attend, for at least three years, a high school or college in which English was the primary language of instruction? Yes No
If no, did you bring documentation of your English Proficiency Test? Yes No
(Accepted documents are: TOEFL PBT (Undergrad 500 or Grad 550); TOEFL iBT (Undergrad 61 or Grad 80); IELTS (Undergrad 6 or Grad 6.5); Pearson (Undergrad 47 or Grad 59))
- Have you lived in the U.S. for the preceding three years? Yes No If no, did you bring a Tuberculosis test verification? Yes No
- All applicants who were born after January 1, 1957 must have proof of MMR (measles, mumps, rubella) immunizations, regardless of citizenship.
Were you born after January 1, 1957? Yes No If yes, have you been immunized against MMR? Yes No
- Citizenship status: U.S. Citizen Non-U.S. Citizen (if non-U.S. citizen, you must complete section B)

B. Non-U.S. Citizens Must Complete The Following Section:

1. **Student or Exchange Visa Holders:** Continuing Education is authorized to enroll F-1 and J-1 Visa holders who can establish that they are maintaining their respective non-immigrant status with their sponsoring universities or institutions. Open University students are not considered to be full-time matriculated students for immigration purposes.
2. **Documents:** Be prepared to present one of the following documents at time of registration.

- a) Immigrant status: Permanent Resident Card# _____ b) Refugee or asylum applicant status: copy of the I-94 document. Admission# _____
- b) Other non-immigrant status: Visa type: _____ Admission #: _____ Passport #: _____
- c) Student status: F-1 or J-1 Visa and your passport. You are required to have the DSO (Designated School Official) or RO (Responsible Official) fill in the box below.

To be completed by DSO for F-1 or RO for J-1 Visa students:

Student status: F-1 Visa, SEVIS ID# _____ or J-1 Visa, SEVIS ID# _____

Passport# _____

At what University / institution is the student admitted? _____ Number of units _____ Quarter or Semester? _____

Authorization by the DSO or RO at that University / institution is required:

Printed Name Signature Date

Phone: (____) _____ Email: _____

3. **Undocumented Resident:**

I certify that I am eligible to take classes due to: AB 540 Affidavit Other _____

C. Certification:

I certify that the information in section A and, if applicable, section B is true and correct.

Signature: _____ Date: _____