



## **NAEA Professional Development Course Registration Request**

Please complete the form as indicated below and return to Regional & Continuing Education at <u>rce@csuchico.edu</u>. You can also register by phone, by mailing this completed form to the CSU, Chico Regional & Continuing Education office at the address below, or online at **rce.csuchico.edu/naea**. The registration deadline, or postmark deadline for mailed registrations, is **August 5, 2016**. A \$10 late fee will be assessed for registration requests received after this date.

Name: Las	st		First			M.I
Have you	previously received credits	from, applied	to, or attended CSU, Chico? □	□ No □ Yes		
If yes, and	different than shown above, r	name on studen	t record:			
Date of Bir	th://///////////////////////	or	Chico State ID Number	Gende	er: $\square$ M $\square$ F	
Address:	Number Street		Room / Apt.	City		State Zip
Phone: (			_ Email:			
Course:	EDUC 832B-201	Title:	NAEA Art Education Ldrshp	<b>Term:</b> Summer 2016 (2166)	Date:	7/28/16-7/30/16
Unit(s):	1 unit	Instructor:	Cris Guenter	<b>Cost:</b> \$85.00	Class ID#:	1273
	department.		,	ol district. 800-level courses do not me		ements unless approved by the appropriate
Payment N	/lethod: ☐ Check (payable					
Card Numb	er:					
Card Expiration (Month & Year)			3 Digit Security Code:	Street Address Number:		Card Zip Code
Name on Ca	ard:					
Signature:				Date:		