Registration Request Form



Please complete the form as indicated below and return for processing to the CSU, Chico Regional & Continuing Education office at the address below. If you'd like you may also register by calling 530-898-6105 or fax this form to 530-898-4020. Please do not include your credit card when faxing, RCE will contact you when your fax is received. A \$10 late fee will apply for requests received after the course has begun or posted deadline. Depending on date of submission the appropriate approvals may also be required to enroll.

		Name:							
Chico State ID Numb	er (If Avail.)	<u> </u>	_ast		First			M.I.	
Have You Previously Rec Date of Birth: MM Address:	///	Gender:		o? No Yes If yes, know.	n a different na	me than above			
Number			Street		Room or Apt	n or Apt. City		State Zip	
Local Phone: (Cell Phone:	: ()_	Email:					
Class #	SUBJECT		SECTION #	COURSE TITLE		COURSE DATES		INSTRUCTOR	
e.g.: 1066 (if known)	e.g.: HIST	e.g.: 130	e.g.: 701	e.g.: United States History		e.g.: 6/3/19-6/21/19	e.g.: 3	e.g.: Smith, Jane	
Гегт: 20	□ Fall □	Winter ☐ Spring	☐ Summer	Registering as: Graduate	□ Undergra	duate Non Credit Wor	kshop/Cor	nf. Participant	
Courses numbered 800 appropriate CSU, Chico		valid for professional	l credit at the dis	cretion of your local school district. 800-lev	el courses do	not meet degree requirem	ents unless	s approved by the	
ayment Options:	Credit Ca	ard Payments: Reg	ister online at r	ce.csuchico.edu (if available) or by callii	ng our office	at 530-898-6105.			
	Check Pa	ayment: Make paya	able to CSU, Ch	Send to: CSU, Chico Regiona 400 W. First Street Chico, CA 95929-025	·	g Education			
CSU, Chico Re	egional & Co	ntinuing Education	1 400 W	. First Street, Chico, CA 95929-0250	Phone: (530) 898-6105 Email: rc	e@csuchi	co.edu Web: rce.csuchico	o.e du

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