OPEN UNIVERSITY REGISTRATION FORM

REGISTRATION DEADLINE: Monday, September 25, 2017

(SEMESTER: FALL 2017)

Address Apt. No.
City State ZIP
( ) ( )
Cellular Other
Email Address Date of Birth: Month/Day/Year

Enter any other name you may have used at CSULB:

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<tr>
<th>ACTION</th>
<th>COURSE SUBJECT AND NUMBER</th>
<th>CLASS NUMBER</th>
<th>SECTION</th>
<th>UNITS</th>
<th>*INSTRUCTOR SIGNATURE</th>
<th>*DEPARTMENT CHAIR SIGNATURE/STAMP</th>
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*Required to add a course.

(CBA courses require CBA Advising approval)

I.D. SERVICES FEE: $  INSTALMENT PLAN FEE: $  OTHER COURSE FEES: $
TOTAL FEES: $  Security Code

Payment Method:
☐ Check # ___________________________ Expiration Date __________________
☐ Credit Card # ____________________

Card Holder’s Name ___________________________ Authorizing Signature __________________

Registration instructions on reverse side

REGISTRATION DEADLINE: Monday, September 25, 2017

(Registration is not complete until registration form is returned to College of Continuing and Professional Education)

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Have you ever applied to CSULB before? ☐ Y (yes); ☐ N (no)

Do you have a Bachelor’s degree? ☐ Y (yes); ☐ N (no)

How did you hear about Open University?

________________________________________________________________________________________

Have you ever attended CSULB before? ☐ Y (yes); ☐ N (no)

If yes, did you attend CSULB prior to Fall 1988? ☐ Y (yes); ☐ N (no)

Enter the last term and year in which you attended a course offered by CSULB:

________________________________________________________________________________________

Before Change ☐ After Change

I understand that enrollment is not finalized until a completed Add form with all required signatures is submitted to CCPE with payment.

I understand that I am responsible for reading and understanding the Add/Drop/Refund policies posted at www.ccpe.csulb.edu/OpenUniversity. Deadlines are on the back of the form.

I understand that CSULB will accept no more than 24 units of Open University coursework toward an undergraduate degree or 9 units toward a graduate degree.

Student Signature ___________________________ Date ____________

Rev: 8/2017 | Priority Code: 2364
Submit this form to College of Continuing and Professional Education after completing the following steps:

A. Print your social security number or campus I.D. number if you are a returning student, name, address, and telephone number at the top of this form.
B. Complete information in the action, course, section, class number, and units column for each course request.

TO ADD A COURSE
1. Fill in action, course, section, class number, and units for each course.
2. Obtain instructor’s signature for each course.
3. Obtain department or designee signature for each course.
4. Register for classes at CCPE office, by turning in the registration form and fee payment on or before Monday, September 25, 2017.

To view student record, please go to my.csulb.edu.

User I.D.: Campus I.D.
Password: Date of birth in six digits only (first time users).

TO DROP A COURSE
1. Check DROP box and complete department, number, section, and units.
2a. AUGUST 28–SEPTEMBER 11
   No signatures or stamps are required.
2b. SEPTEMBER 12–NOVEMBER 17
   Instructor and department chairperson signatures are required. You will receive a “W” on your transcript. A “Petition to Withdraw” form must be used.
2c. Submit completed form to CCPE office.
2d. NOVEMBER 20–DECEMBER 12
   Instructor, department chairperson, and college dean signatures are required. Only extenuating circumstances will be considered. University Provost will review for final approval.
2e. Submit form to Enrollment Services during the last three weeks of the semester.
3. Last day to drop a course is Tuesday, December 12, 2017.

Open university students must use open university registration forms to add classes.

REFUND SCHEDULE

Last day to receive a partial refund is Friday, September 15, 2017.

Week 1– Week 3 (August 28–September 15) ................................................................. 65% of total fees
Start of Fourth week (September 18) ................................................................. No Refund

Students registering for internet courses, do so with the understanding that they must have an alternate computer, in the event there is a system failure to their primary computer. No refunds will be granted due to student’s personal computer failure.

Questions? Please call (800) 963-2250 or (562) 985-5561 • ccpe-info@csulb.edu
Hours: Monday through Thursday 8am–5pm, Fridays 9am–5pm