

Registration Form

Extended Education: Off-Campus Credit Contracts
Division of Continuing Education



(Please print)

Full Legal Name _____ CSUID \ SSN _____
Last First Middle

Mailing Address _____
City State Zip

Home Phone _____ Other Phone _____

Email _____ Birth Date ____ / ____ / ____ Gender: Female Male
MM DD YY

Ethnicity (check one - optional)

- African American or Black
- American Indian or Alaska Native
- Asian American
- Hispanic, Chicano, Mexican American, Latino
- Native Hawaiian or Other Pacific Islander
- White, Caucasian, Anglo, not of Hispanic Origin
- Other: _____
- I do not wish to provide this information

Class Level _____

Undergraduate:

- 11 = Freshman (0-29 credits)
- 21 = Sophomore (30-59 credits)
- 31 = Junior (60-89 credits)
- 41 = Senior (90+ credits)
- 44 = Post Bachelor
- 45 = 2nd Bachelor

Graduate:

- 51 = Not admitted to Graduate School
- 52 = Admitted to Graduate School in Master's Program
- 61 = Admitted to Graduate School in Ph.D. Program

Have you previously enrolled in credit courses through Colorado State University? Yes No

To comply with Colorado state law, all males between the ages of 17 years 9 months and 26 years must answer the following question: Are you registered with the selective service? Yes No Not Applicable

Course Information	Summer 2008	MU 590K	737
Workshop: Computers in Music Education: TI:ME IA: Basic Skills in Music Technology			
Credits:	2 cr.	Grading Option:	Instructor Option
Tuition:	\$144 + Fees: \$0 = \$144	Dates:	7/7/08 - 8/8/08 (5 wks.)

Payment Information
<input type="checkbox"/> Cash <input type="checkbox"/> Credit Card # _____ Expiration Date ____ / ____
<input type="checkbox"/> Check # _____ <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA

In signing this form, I certify that the information listed above is correct, that I have read and understand the drop and refund policy on my receipt, and that I agree to abide by all policies of Colorado State University and the Division of Continuing Education.

Signature _____ Date _____

