

# 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

<b>Course Information</b>	Summer 2008	MU 590K	739
Workshop: Computers in Music Education: TI:ME 2A Competencies			
Credits:	2 cr.	Grading Option:	Instructor Option
Tuition:	\$144 + Fees: \$0 = \$144	Dates:	6/30/08 - 7/4/08 (1 wks.)

<b>Payment Information</b>
<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 \_\_\_\_\_

