# Winter Sessions Registration Form

CALIFORNIA STATE UNIVERSITY **LONG BEACH**
COLLEGE OF **CONTINUING** AND **PROFESSIONAL EDUCATION**

**PLEASE PRINT**

☐☐☐ — ☐☐ — ☐☐☐☐

**SOCIAL SECURITY NUMBER (NEW STUDENT ONLY)**

**CAMPUS I.D.** (Returning Student)

LAST NAME

FIRST NAME MI

| CLASS 1 | | CLASS 2 | | CLASS 3 | |
|---|---|---|---|---|---|
| ❑ Add | ❑ Drop | ❑ Add | ❑ Drop | ❑ Add | ❑ Drop |
| CLASS # | COURSE | CLASS # | COURSE | CLASS # | COURSE |
| SECTION # | UNITS | SECTION # | UNITS | SECTION # | UNITS |
| INSTRUCTOR SIGNATURE | | INSTRUCTOR SIGNATURE | | INSTRUCTOR SIGNATURE | |
| DATE | | DATE | | DATE | |

Street

City State ZIP

( ) ( )
Preferred Day Telephone Evening Telephone

E-mail Address:

Date of Birth _____ Gender _____
Month Day Year

Have you ever been enrolled at CSULB? Yes ❑ No ❑

If **yes**, did you attend **prior** to Fall 1988? Yes ❑ No ❑

Do you have a Bachelor's degree? Yes ❑ No ❑

Are you currently a disqualified student? Yes ❑ No ❑

Enter the term and year in which you **last** attended:

_____ / _____
Term Year

If no, **last** institution attended: _____

**COUNTRY OF CITIZENSHIP:**

I understand that this enrollment does not constitute admission to the University. I have been advised of the registration procedures and understand the procedures on withdrawal and fee refund policy by the CCPE student representative.

_____ _____
Student's Signature Date

**OFFICE USE ONLY**

**UNITS:**

☐ Before Change

☐ After Change

**FEES:**

Class 1 $_____

Class 2 $_____

Late Fee $_____

Payment Plan $_____

Total $_____

**METHOD OF PAYMENT:**

❑ Other _____

❑ Check # _____

❑ Credit Card

Credit Card No.: _____

Exp.Date: _____ / _____

Security Code: _____

Name as it appears on card:

_____

Authorized Signature: _____

❑ **EXTRA UNITS PETITION RECEIVED**

❑ **PAYMENT PLAN**

☐
INITIALS

White – CCPE
Pink – Student

Rev. 10/2016 | Priority Code: 2181