

Sonoma State University School of Extended and International Education

Spanish MA Registration Form

Term _____

Name (Last, First)

Policies governing Extended Education courses and programs, including refunds and use of Social Security Number, can be found at www.sonoma.edu/exed.

- Students are responsible for fulfilling all course pre-requisites.
- If you need accommodations, the Disability Services for Students office is in Salazar 1049, phone 707-664-2677; TDD 707-664-2958.

PLEASE FILL OUT ALL INFORMATION AND PRINT CLEARLY: WE CANNOT REGISTER YOU WITHOUT COMPLETE, LEGIBLE INFORMATION.

SSU Student ID Number _____

Name (last, first) _____

Other name(s) _____

Mailing Address _____

City, State, Zip _____ Preferred Phone _____

Preferred e-mail _____

Note: Current SSU degree-seeking students *must* list their SSU e-mail. We cannot use private e-mails for University business.

PLEASE NOTE: You must turn in appropriate approval forms for the below classes, signed by instructors/advisors, in order to register. See Registration Instructions for details.

Grade mode: Fill in your choice of Cr/NC or Graded. Please note that some courses have a fixed mode. Up to 10 units may be in Cr/NC mode for an MA/MS at program discretion.

Dept & Course (e.g. SPAN 501)	Class # (0000)	Title (Abbreviate)	Grade Mode (see above)	Units	Fee @ \$560/unit
SPAN 501		Teaching Practicum/Internship			\$
SPAN 595					\$
SPAN 595					\$
					\$
			TOTAL		\$

I have read and agree to abide by the refund and other deadlines and policies covering these courses, available at www.sonoma.edu/exed/geninfo. If my payment by check is not honored by the bank, or my credit card is declined, I understand that I am still responsible for all course fees, and that if payment is not received by SEIE within three business days of notification of a balance due, I may be disenrolled.

I have applied for financial aid. I have attached my *Authorization to Apply Financial Aid* form. I understand that if I do not have an award in place by August 14, I must pay my fees and be reimbursed when my award is disbursed. I also understand that if my award is not sufficient to cover my fees, I am responsible for paying the balance.

Signature _____ Date _____

Bring to SEIE Office, Stevenson 1012 or **mail to** Extended Education Registration, 1801 E Cotati Ave, Rohnert Park, CA 94928-3609, including all required signed approval forms.

Sensitive information below this line will be shredded after registration is accomplished.

If no Student ID #, Social Security Number _____ Birthdate _____

Method of Payment Check Money Order (payable to Sonoma State University)
 Credit Card (Circle one: VISA / MasterCard / Discover / American Express)

Cardholder's name _____ For the amount \$ _____

Card number _____ Expiration date (mm/yy) _____