

PORTLAND STATE UNIVERSITY CONTINUING EDUCATION COOPERATIVE AGENCY CREDIT REGISTRATION FORM

PSU ID# (if previously attended PSU)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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THIS IS THE REGISTRATION FORM FOR PSU CREDIT.

PLEASE MAIL THIS REGISTRATION FORM TO THE FOLLOWING:

PSU/Continuing Education
PO Box 1629
Portland, OR 97207-1629

DO NOT SEND PAYMENT WITH THIS FORM. YOU WILL BE BILLED BY PSU FOR COURSE COSTS.

INFORMATION:

In Portland: 503-725-4825
Tollfree: 1-800-547-8887 ext 54825
Fax: 503-725-4737

PLEASE PRINT

DATE _____

Date of Birth (REQUIRED):
 Month Day Year

LAST NAME NEW? FIRST MIDDLE PREVIOUS NAMES
 (If previous records are under a different name, please include other name.)

HOME ADDRESS NEW?

CITY STATE ZIP DAY PHONE EVENING PHONE

PREFERRED EMAIL EMAIL FAX

Non-admitted students may take up to 8 credits in each of fall, winter, and spring terms; and up to 21 in summer. Admitted graduate students are limited to a maximum of 16 credits in each of all four terms, unless otherwise approved. All University policies apply. Please call 503-725-3511 for PSU admission/re-enrollment information.

PLEASE RESPOND TO THE FOLLOWING (OPTIONAL)

Female Do you have a bachelor's degree? U.S. citizen A Asian
 Male Yes Permanent U.S. resident H Hispanic
 No Student visa or other visa P Pacific Islander
 B Black, Non-Hispanic
 I American Indian or Alaska Native
 W White, Non-Hispanic
 O Other _____
 D Decline to respond

TERM	YEAR									
				<input type="text"/> # of credits	<input type="checkbox"/> Pass/ <input type="checkbox"/> No pass	<input type="checkbox"/> Audit	<input type="checkbox"/> A-F	<input type="checkbox"/> Noncredit	\$	
COURSE #	COURSE TITLE	DEPT	Ug/Gr	<input type="text"/> # of credits	<input type="checkbox"/> Pass/ <input type="checkbox"/> No pass	<input type="checkbox"/> Audit	<input type="checkbox"/> A-F	<input type="checkbox"/> Noncredit	PSU FEE	\$
COURSE #	COURSE TITLE	DEPT	Ug/Gr	<input type="text"/> # of credits	<input type="checkbox"/> Pass/ <input type="checkbox"/> No pass	<input type="checkbox"/> Audit	<input type="checkbox"/> A-F	<input type="checkbox"/> Noncredit	PSU FEE	\$
COURSE #	COURSE TITLE	DEPT	Ug/Gr						PSU FEE	
									TOTAL	_____

STUDENT SIGNATURE (required) _____

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