

SEMESTER	YEAR
ENTERED IN SYSTEM BY	DATE

The Tseng College Registration Form

The Tseng College · Office of Admission, Registration and Client Services · (818) 677-2504 · fax (818) 677-2288 · <http://TsengCollege.CSUN.edu>

STUDENT INFORMATION (Please print LEGIBLY)

LEGAL NAME: <i>Last Name</i>		<i>First Name</i>	<i>Middle Initial</i>	<i>Maiden/Other Name</i>
MAILING ADDRESS: <i>Street</i>		<i>Apt/Unit Number</i>	HOME TELEPHONE	
<i>City</i>	<i>State</i>	<i>Zip Code</i>	CELL	
1. Class level: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate		3. Program to enroll (select one) <input type="checkbox"/> Open University <input type="checkbox"/> Master's in Public Administration (MPA) <input type="checkbox"/> Intensive English Program (IEP) <input type="checkbox"/> Semester at CSUN (SAC) <input type="checkbox"/> Other: _____		CSUN ID NUMBER ____ - ____ - ____ - ____ - ____
2. Have you ever attended CSUN? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", when? <input type="checkbox"/> Regular <input type="checkbox"/> Extended Learning Term: _____ Year: _____				BIRTH DATE (used to identify the student's record) MO: ____ DAY: ____ YR: ____
				E-MAIL ADDRESS (REQUIRED) _____

COURSE INFORMATION

CLASS NUMBER	SUBJECT AREA	CATALOG NUMBER	UNITS	COURSE TITLE	PERMISSION NUMBER	CHECK ONE		COURSE FEE	TOTAL FEE
						GRADE	CR/NC		
Total Fee									

REQUIRED INFORMATION

Pursuant to Directory Information as authorized by the Family Educational Right and Privacy Act of 1974 (Buckley amendment), the University, UNLESS YOU INDICATE TO THE CONTRARY below, may release to requesting sources such as prospective employers, military service branches, financial institutions, etc., all or part of the following information from your records; name; address; telephone number; date and place of birth; major; dates of attendance; degrees and awards; work in progress and work completed; prior institutions attended.

☐ Do not release above information.

To the best of my knowledge, the information on this form is correct. I understand that I am subject to The Tseng College regulations regarding fees, refunds, change of program, grading and transcripts. I am currently not under disciplinary suspension or expulsion.

SIGNATURE	DATE

Payment Amount \$ _____ <input type="checkbox"/> Cash \$ _____ <input type="checkbox"/> Credit \$ _____ <input type="checkbox"/> Check \$ _____	VISA OR MASTERCARD CREDIT CARD NUMBER	EXPIRATION DATE ____ / ____
	NAME ON CREDIT CARD	3-DIGIT SECURITY CODE
	CARD HOLDER'S SIGNATURE	TELEPHONE NUMBER