

COURSE REGISTRATION FORM

Register Online!
• Instant Course Confirmation
• Faster Processing

Check if you are a returning student and this is a new address

NAME (last/first/middle initial) _____

CURRENT ADDRESS _____

CITY _____ STATE _____ ZIP _____

EVENING PHONE _____ DAY PHONE _____ DATE OF BIRTH (required) _____

EMAIL ADDRESS *A valid Stanford email address is required when selecting any Stanford-affiliated discount below.* _____

TUITION ASSISTANCE (Choose only one; see page 61 for eligibility)

A. Stanford Employee using STAP Funds: _____ UNIVERSITY ID*
*Required for STAP users
 Stanford Hospital Employee using STAP Funds (see your HR manager for required form)

B. 20% Discount (check one):
 Stanford Faculty Stanford staff, part-time, or non-STAP-eligible
 Stanford Postdoc SUMC or Hospital employee (not using STAP)

C. CSP Instructor? Yes Spouse/Domestic Partner of an Instructor? Yes
 List Instructor's Name: _____

D. 15% Discount:
 Stanford Alumni or GSB Alumni Assoc. Member: _____
Member No. Required

E. 20% Discount (check one):
 65+ Credentialed Classroom Teachers (verification required)

REGISTRATION *We will accept registration sent by US mail postmarked May 16 or later.*

COURSE TITLE _____

COURSE CODE _____ TUITION _____

Select Grade Option
 No Grade Requested Credit/No Credit Letter Grade
(default, no written work required) (attend/participation required) (written work required)
NOTE: Credit or a Letter Grade MUST be selected in order to receive proof of completion.

COURSE TITLE _____

COURSE CODE _____ TUITION _____

No Grade Requested Credit/No Credit Letter Grade

COURSE TITLE _____

COURSE CODE _____ TUITION _____

No Grade Requested Credit/No Credit Letter Grade

If my chosen course fills, please register me for the following alternate course:

METHOD OF PAYMENT

CHECK (payable to Stanford University)
 MASTERCARD VISA
 AMERICAN EXPRESS

CREDIT CARD NUMBER _____ CVC Code _____

EXPIRATION DATE _____

SIGNATURE _____

TUITION TOTAL _____

TUITION ASSISTANCE (-) _____

ADDTL COURSE FEE (IF ANY) + _____
(Non-refundable)

REQD REGISTRATION FEE + 35.00 _____
(Non-refundable)

TOTAL _____

If total is \$1-\$99: Registration fee does not apply but no discounts are applicable
 If total is \$100+: Registration fee of \$35 does apply
 (See opposite page for registration policies)

I agree to read the Student Code of Conduct, found on the Continuing Studies website, prior to the start of my course.

These questions are asked per new federal regulations. The information you provide will be used for analysis and reporting and will be kept confidential. Please check all that apply:

AFRICAN AMERICAN MALE
 HISPANIC FEMALE
 CAUCASIAN
 AMERICAN INDIAN/ALASKA NATIVE HIGH SCHOOL OR EQUIVALENT
 NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER UNDERGRADUATE
 ASIAN GRADUATE (MASTERS)
 OTHER PROFESSIONAL (JD, MD, PHD)
 DECLINE TO STATE

Are you a US citizen?
 YES NO

Are you a Stanford alumnus/a?
 YES NO

How did you hear about the Stanford Continuing Studies Program?

4 WAYS TO REGISTER! **WEB** continuingstudies.stanford.edu **MAIL** Stanford Continuing Studies
FAX 650-725-4248 365 Lasuen Street, Littlefield Center
IN PERSON Mon-Fri, 8:30 am-12:00; 1:00-5:00 pm Stanford, CA 94305-5005

THIS FORM MAY BE DUPLICATED. EACH REGISTRANT MUST HAVE A SEPARATE FORM. YOU WILL RECEIVE A WRITTEN CONFIRMATION OF YOUR COURSE ENROLLMENT, INCLUDING ROOM LOCATION AND COURSE MATERIALS, BEFORE THE FIRST CLASS MEETING.