

Extended University

ENROLLMENT FORM

	<u>171 v</u>	<u>ROLLINLIVI I</u>	<u>OIIII</u>			
Date:	Birthdate:	SS#:		Γerm/Year: :	Spring 20	019
Last Name:		First Name:		_ M.I		
Address:						
City:		State:		Zip:		
Telephone: (Hom	e)	(Cell)				
E-mail Address:						
_	7), CPIN Professional Le th, 2019 – April 29 th , 2019		iteracy (1 unit) Fee: \$10	0.00		
Credit Card #: Exp Date:		AME	X Master	Card	VISA	
	ature:					
	vable to CSUCI): Chec					
You can enroll in p	One	J Channel Islands Exter Hall 2109 University Drive narillo, CA 93012	nded University			