



Cal State San Marcos

CALIFORNIA STATE UNIVERSITY, San Marcos
Extended Studies Contract Course Form

Term: _____ Location: _____

Name _____ SSN _____

Address _____

City _____ State _____ Zip _____ E-Mail: _____

Telephone () _____ Birthdate _____

Additional Information Required:

Have you attended CSU San Marcos before: Yes _____ No _____ : If yes, then Semester _____, Year _____

• Sex: Circle M (male) or F (female)

• Ethnic Identity (optional): Circle one

- 1 American Indian or Alaskan Native
2 Black, non-Hispanic, inc. African American
3 Mexican-American, Mexican, Chicano
A Central American
B South American
Q Cuban
P Puerto Rican
4 Other Hispanic, Spanish-origin, Hispanic
C Chinese
J Japanese
K Korean
R Asian Indian
5 Other Asian
M Cambodian
L Laotian
V Vietnamese
T Thai
S Other Southeast Asian
G Guamanian
H Hawaiian
N Samoan
6 Other Pacific Islander
7 White
F Filipino
8 Other
9 No response
D Decline to state

• Citizenship Status: Circle your status

- Y U.S. citizen
F F visa (student)
J J visa
N None of the above
I Immigrant
I-551 (green card)
Date issued: _____
R Refugee
O Other visa (specify): _____

Table with 7 columns: CRN, Course# (e.g., EDUC E364), Section, Instructor's Name, Units, Fee/Unit, Total. Includes a Total row at the bottom right.

NOTE: • FEES MUST BE PAID AT TIME OF REGISTRATION
• FOR INFORMATION REGARDING TRANSCRIPTS, CONTACT REGISTRATION & RECORDS AT 750-4814.

I understand that enrollment in the Extended Studies program at CSU San Marcos does not imply admission into the University and that coursework taken through Extended Studies is subject to evaluation for any admission request at a later date.

Date _____

Student Signature _____

Payment Options: [] Check/Money Order [] VISA [] MasterCard
(Payable to CSUSM, please write your Social Security Number on check payments)
Card No: _____ Exp. Date: _____ Authorized to Charge \$ _____
Cardholder's Name and Address (If different from student) _____
Day Telephone: _____
Cardholder's Signature: _____