



enrollment form

Faculty and Staff form

ENROLL BY MAIL

University of California Extension
Attention: Registration
1101 Pacific Ave., Suite 200, Santa Cruz, CA 95060-7507

ENROLL BY FAX

(831) 421-0344

ENROLL BY PHONE

(800) 660-UNEX (8639) inside California,
(831) 427-6600 outside California; Mon–Fri, 8 am–5:00 pm

Check here if you are a UC employee. Employee ID number _____

Please Print

Mr./Ms. _____
Last Name First (given) Middle

Social Security No. _____ Daytime Phone _____ Home Phone _____
(Social Security number required by the Taxpayer Relief Act of 1997.) Area Area

Home Address _____
Street City State Zip Code

Occupation _____ E-Mail Address _____
(May be used to announce special UCSC Extension programs.)

Course Title	Enrollment Code	Starting Date	Fee
Less Discount (UCSC faculty and staff only, UCSC Extension offers a discount of 30 percent (not to exceed \$150 for any single course) on enrollment fees for any course in its catalog.)			
All fees must be paid at the time of enrollment			TOTAL

Make checks payable to **Regents, University of California**, or charge to:

VISA MasterCard American Express Diner's Club NOVUS (includes Discover Card, BRAVO and Private Issue)

Credit card billing street address and zip code if different from student address:

_____ Street City State Zip Code

Account Number _____ Expiration Date _____

Authorizing Signature _____ First-Time Enrollment

For additional persons enrolling, please give same information on a separate sheet.

For disability accommodations, call (831) 427-6606; TTY (831) 427-6696. Two weeks advance notice requested.