

OSU Extended Campus

4943 The Valley Library, Corvallis, OR 97331-4504 FAX: 541-737-2734

Workshop Credit Application

Please print

Today's Date: _____ Term Year: _____ Fall Winter Spring Summer
OSU ID#: _____ Social Security #: _____ Date of Birth: _____
Last Name: _____ Previous Last Name: _____
First Name: _____ Middle Name: _____
Street Address: _____ City/State/Zip: _____
Mailing Address: _____ City/State/Zip: _____
Email Address: _____ Phone Number: _____

Check one: Male Female

Ethnic Code (Optional) Indicate one:

B African American

A Asian or Pacific Islander

W White, Non-Hispanic

I American Indian/Alaska Native

H Hispanic/Chicano/Latino

D Decline to respond

Previous bachelor's degree: Yes No Previous attendance at OSU: Yes No Dates: _____

Current Degree Seeking Information

College code: _____ Academic major code: _____ Degree sought: _____

Course Information

Course#	CRN#	Title	Instructor	Credits	A-F	P/N	Audit	Fee
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(408 = Undergraduate, 508 = Graduate, 808 = Professional Development)

Admission Fee: \$25.00

Total: _____

Admission Fee

OSU is on Quarter System. If you are not an active admitted student there will be an additional \$25.00 admission fee. Students are considered active if they have registered for an OSU credit class or workshop within the last three terms. If a student has not registered for an OSU class or workshop within the last academic term, they are in an inactive status and must be re-admitted. Once you have completed and returned this registration form, you are officially registered for this class. You will not be able to drop this class at a later date. You will be responsible for paying for tuition and fees associated with this course.

Billing Statement

OSU is on the E-Billing System; NO billing statements will be mailed out. You will need to access your account through Student Services, or contact Student Accounts at 541-737-3775 to avoid late fees and penalties.

Signature: _____

Official Use Only:

Date Received _____ Admit Fee _____ Non-degree Admit Fee _____

Date Entered _____ Late Fee _____ Vault # _____