



Open University Registration Form

IMPORTANT: You must obtain signatures from the instructor and department chair on this form in order to add or drop an Open University course. After you have obtained the required signatures, submit the form to the College of Continuing Education in Napa Hall. Please refer to the Open University web page for registration deadlines and withdrawal procedures for each term.

PLEASE PRINT CLEARLY ALL INFORMATION BELOW:

Year: _____ Term: _____

Legal Name (Last, First, MI)		Sac State ID	
DIRECTORY INFORMATION			
Street Address		Telephone Number	Date of Birth (mm/dd/yy)
City, State, Zip		Do you currently have a bachelor's degree? ☐ Yes ☐ No	Gender: ☐ Male ☐ Female ☐ Other/Non-Binary
Email		Have you ever attended Sac State classes? ☐ Yes ☐ No	

Are you an International Student? ☐ Yes ☐ No If yes, what type of visa do you hold?: _____

List Below All Courses You Wish To Register For:

The instructor's signature is required once the session has begun unless otherwise noted in the course footnotes.

Check one

Class#	☐ Add ☐ Audit ☐ Drop	Dept. & Course#	Section#	Units	Print Instructor's name	Instructor's Signature	Initials
						Department Chair's Signature	
						Instructor's Signature	Initials
						Department Chair's Signature	
						Instructor's Signature	Initials
						Department Chair's Signature	
						Instructor's Signature	Initials
						Department Chair's Signature	

Office Use Only

Date _____	By _____
REG _____	CON _____
Unit Fee _____	\$ 0
Additional Fee _____	\$
Late Fee _____	\$
Total Units _____	TOTAL OWED \$ 0.00
	Paid \$
Sponsor _____	BALANCE \$
Notes _____	

I understand that this enrollment does not constitute admission to the university. I have read the information and registration procedures and understand the procedures of withdrawal and fee refund policy. If taking a graduate level course, I have a baccalaureate degree; if not, I have informed the instructor that I do not have a baccalaureate degree.

Student Signature

Date Registration Submitted