



School of Extended Education  
1801 E. Cotati Avenue, Rohnert Park, CA 94928  
(707) 664-2394

**B.A. LIBERAL STUDIES NAPA VALLEY  
REGISTRATION FORM  
Spring 2010**

**Student ID#** \_\_\_\_\_ **Birthdate** (00/00/00) \_\_\_\_\_ **Sex** (M or F) \_\_\_\_\_

**Name** (last, first, middle initial) \_\_\_\_\_

**Current mailing address:** \_\_\_\_\_  
Number and Street Name City State Zip Code

**Day Phone** \_\_\_\_\_ **Evening Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

Will your employer reimburse your tuition?  Yes  No If yes, Company name \_\_\_\_\_

Company address: City, State, Zip \_\_\_\_\_

Please enter the appropriate code letter in boxes below:

Occupation:

- |                           |                                 |
|---------------------------|---------------------------------|
| (T) Teacher               | (W) Skilled Worker/Craftsperson |
| (B) Business Professional | (M) Military                    |
| (S) Student               | (D) Homemaker                   |
| (H) Health Professional   | (R) Retired                     |
| (O) Other                 |                                 |

Refund Policy: Consult the School of Extended Education at  
<http://www.sonoma.edu/exed/> or call 707/664-2394 regarding  
specific questions.

Title of Course(s) you wish to enroll in	Dept. & Course #	Schedule # (0000)	Units	Fee
<input type="checkbox"/> Ethnic Values & Multiculturalism	AMCS 350	3961	3	\$885
<input type="checkbox"/> Modern World Literature in English	ENGL 314	3962	3	\$885
<input type="checkbox"/> Geography of the Pacific	GEOG 396	3963	4	\$1180
<input type="checkbox"/> America in Depression & War	HIST 457	3964	4	\$1180
<input type="checkbox"/> Internship	SOCI 499	4029	1	\$295
<input type="checkbox"/> Internship	SOCI 499	4030	2	\$590
<input type="checkbox"/> Internship	SOCI 499	4031	3	\$885

**For Office Use Only:** Verified by \_\_\_\_\_

Cash Receipt# \_\_\_\_\_ Check # \_\_\_\_\_

Payee Name \_\_\_\_\_

Visa/MC authorization# \_\_\_\_\_

Total Paid \$ \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

**I have applied for financial aid:**

Yes  No (check one)

If yes, you must complete and sign an "Authorization to Apply Financial Aid to Other Charges" form and the "Fee Voucher Promissory Note" and return them both to the Registrar in Extended Education, Stevenson 1012.

I enclose:  Check  Money Order  VISA  MasterCard  Discover  American Express For the amount of \$ \_\_\_\_\_

Cardholder's name \_\_\_\_\_ Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

I agree to abide by the deadlines and policies governing these courses. If my payment by check is not honored by the bank, I am still responsible for all course fees.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail to: School of Extended Education, Sonoma State University, 1801 E. Cotati Ave., Rohnert Park, CA 94928-3609.