

Student Fee Waiver Request OVER 60 PROGRAM

This waiver form must be submitted to the Office of the Registrar in UH-171.

NAME	E. 4	irst Middle Initial COYOTE ID#		
Last	First	Middle Initial		
ADDRESS	CITY _		STATE	ZIP
PHONE NUMBER: Home ()	Work/Ce	ell ()_	
MYCOYOTE E-MAIL ADDRES	S			
DATE OF BIRTH: (mm/dd/yyy	y)/	/		
SEMESTER & YEAR FOR WHICH YOU ARE APPLYING: Sem				Year
DEGREE OBJECTIVE: (BA/BS;	MA/MS; Other)	Major		
STUDENT'S SIGNATURE			DATE	

REGISTRATION INFORMATION

Persons enrolling in the program will be able to register using the myCoyote on-line registration system. Students will be assigned an Enrollment Appointment to register for classes at mycoyote.csusb.edu.

If a student applies to this program after the Enrollment Appointment period has ended, they will then register during the open and/or late registration periods, which require pre-payment of fees. However, the \$25.00 late fee will be waived.

For questions regarding the Over 60 Program, please call us at 909-537-7671. Or you may email questions to <u>registrationhelp@csusb.edu</u>.

Submit this request to:

Attn: Over 60 Program
Office of the Registrar; UH-171
California State University, San Bernardino
5500 University Parkway
San Bernardino, CA 92407