# Registration Add or Drop Form

Submit registration form to Registration Services by fax 1 (408) 924-2077, or walk-in. Disabled Students who need help with phone registration call 1 (408) 924-6000 or TDD 1 (408) 924-5990.

Degree: □ Undergraduate □ Graduate  
Year: ___________  
Term: □ Winter □ Spring □ Summer □ Fall  
SJISU ID Number: ___________  
SSN (Optional): ___________  
Last Name: ___________  
First Name: ___________  
Middle Name: ___________  
Other Name(s) used at SJISU: ___________  
Street Address: ___________  
City: ___________  
State: ___________  
Zip: ___________  
Daytime Phone: ___________  
Evening Phone: ___________  
Email: ___________  
Date of Birth: ___________  
Gender: □ Female □ Male  
Highest class level achieved or degree obtained: □ No Prior College □ Freshman (1-29 Units) □ Sophomore (30-59 Units) □ Junior (60-89 Units) □ Senior (90+ Units) □ Bachelor’s Degree □ Master’s Degree □ Doctoral Degree

<table>
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<tr>
<th>Add</th>
<th>Drop</th>
<th>5 Digit Course Code</th>
<th>Permission Number</th>
<th>Subject</th>
<th>Catalog Number</th>
<th>Section</th>
<th>Units</th>
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Total Fees Due: ___________

- **Cash/Debit Card** - Pay in person. SJISU ID Number required.
- **E-Check** - http://my.sjsu.edu SJISU ID Number and password required for access.
- **Credit Card** - American Express, Discover/Novus and MasterCard: not accepted in person at the Bursar’s Office cashiering windows. http://my.sjsu.edu SJISU ID Number and password required for access.
- **Check, Cashier’s Check or Money Order** - Student’s name, local telephone number where they can be reached and SJISU ID Number—not SSN—must be on the face of the check. If the bank for any reason dishonors a check, the registration is subject to cancellation. Classes will be dropped immediately without prior notification. A $25 fee is charged for the first returned check and $35 thereafter. An additional administrative fee may also be charged. SJISU has no control whether the bank sends checks through a second time for clearing. Mail checks to Bursar’s Office, SJISU, One Washington Square, San Jose, CA 95192-0138

- **Third-Party Sponsor** - A purchase order or payment authorization must be attached to this form showing the sponsor’s name, contact person, address, telephone number, fee, course title and start date. Incomplete third-party registrations will be returned.

If my payment by check or credit card is not paid by the bank. I am responsible for all course fees. I authorize the Office of International and Extended Studies to change my record, if necessary to reflect the above information.

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Student’s Name (Please print clearly)  
Student’s Signature  
Date

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**FOR BURSAR’S OFFICE USE ONLY**

Receipt Number: ___________  
Amount Paid: ___________  
Date: ___________  
Cashier: ___________  
Reference Number: ___________  
Authorization Number: ___________