



San José State
UNIVERSITY

Department of Special Education, College of Education
One Washington Square SH 204, San Jose, CA 95192 -0078
408-924-3700

Information Form For Course Registration

Semester: _____

EDSE 234: EDSE 281:

Name: _____ SSN: _____

Address: _____

City: _____ ZIP: _____

Home Phone: (____) _____ E-Mail: _____

Class: Graduate: Senior: Junior:

Category: Credential: HI Minor:

If HI Minor, what Major area? _____

Number of Sign Classes Completed In: SEE ASL

Please List Program Courses Completed:

What are you currently enrolled in?

Which sites/teachers do you prefer?

Site (s) : _____

Teacher (s) : _____