



CENTRAL WASHINGTON UNIVERSITY

OFFICE OF CONTINUING EDUCATION CORNERSTONE REGISTRATION FORM

400 East University Way • Ellensburg WA 98926-7433 • Office: 509.963.1504 • Fax: 509.963.1690 • Web: www.cwu.edu

[ ] New Student/First Registration (Attach Application)\* [ ] Returning Student- Last quarter enrolled \_\_\_\_\_

Grid for Social Security Number (new students)

OR

Grid for CWU ID Number (returning students)

Social Security Number (new students) (optional: but necessary for the 1098T tax deduction)

CWU ID Number (returning students)

LEGAL NAME

Form for Last, First, Middle name fields

PERMANENT MAILING ADDRESS

Form for Street Address or PO Box, City, State, Zip, County

Form for Cell Phone, Home Phone, E-mail

Form for Gender (Male/Female), Birthdate, and Would you like information about applying to CWU after graduation?

Form for Teacher's Name, School's Name, and Grade Level (10th, 11th, 12th)

REGISTRATION INFORMATION

Table with columns: Subject, Catalog No., Course Title, Credits, Start Date, Total Tuition

METHOD OF PAYMENT: [ ] School District Invoice, [ ] Check or Money Order Number, [ ] CREDIT CARD PAYMENTS CALL: 509-963-1504 Date called: \_\_\_/\_\_\_/\_\_\_

Tuition rate is \$50 per credit

Withdrawal/Refund Policy: All requests for withdrawals need to be submitted in writing to your teacher

You may withdraw and receive a refund from a course through the second week of instruction. No refund will be granted after the second week. Withdrawals are done through the high school teacher and the CWU Cornerstone Program Coordinator.

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

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

Legal consent required for students under the age of 18

Form for Parent's First Name, Parent's Last Name, Parent's Phone

Contact: Email: cornerstone@cwu.edu or call the Office of Continuing Education at (509)963.1526

Transcripts: Information on ordering a transcript is available at: http://www.cwu.edu/~regi/requesttranscripts/transcript1.html

Official Use Only:

Form with checkboxes: On File, Requested, and columns: Application, Quarter, Class Number, Registered, Note

\* The Application is available from your teacher or by calling 509.963.1504