

PLEASE COMPLETE FORM & PRINT CLEARLY
UNIVERSITY OF THE PACIFIC



Attach Your Check Here
or provide credit card information:

☐ CHECK ENCLOSED - PAYABLE TO UNIVERSITY OF THE PACIFIC

☐ VISA OR MASTERCARD NUMBER

EXPIRATION DATE:

"Required to Process"

month

year

Charge \$ _____ to my credit card.

Signature _____

RECEIVED BY EMAIL

(\$25 Fee for returned checks)

REGISTRATION FORM

Highest Degree earned _____ From _____

Previously enrolled in Professional Development from UOP? YES ☐ NO ☐

District: _____

(NO Abbreviations)

PLEASE TYPE, OR PRINT NEATLY
WITH A DARK BLACK OR BLUE PEN

CFE

Enrollment Date

Completion Date

COURSE NUMBER:

COURSE TITLE:

PE DU

AREA CODE & PHONE NUMBER

BIRTH DATE

S.S.#

HM:

WK:

NAME

LAST

FIRST

M.I.

ADDRESS

CITY

STATE

ZIP

Please enroll me in:

Number of Semester
Units of Credit.....

Fee Per
Unit....

\$ 62

Tuition
Submitted....

\$

Email (required):

Have you been approved by Colleen Myers to enroll in the course? YES NO

Please explain briefly your course objectives/goals:

To Email Registration Form:

Step 1: Download and Save the blank PDF Registration Form to your desktop. Do not type directly onto the Registration Form. First, make sure the Registration Form is saved to your desktop.

Step 2: Reopen the saved registration form onto your desktop and type in all the requested information.

Step 3: Save the completed Registration Form to your desktop and email as an attachment to:

info@creditsforeducators.com

Please put in the subject line: "New Registration"

After receiving your Registration Form, *Credits for Educators* will send you a confirmation by email. Please allow a few business days to receive your confirmation.

To Mail Registration Form

Step 1: Download and Save the blank PDF Registration Form to your desktop. Do not type directly onto the Registration Form. First, make sure the Registration Form is saved to your desktop.

Step 2: Complete the form and click the [PRINT](#) button above or select "File>Print" to print your document. Do not select "Fit to Page" as the entries will not line up in the form, instead select "Actual Size."

Step 3: Mail printed Registration Form to our mailing address:

Dr. Allan Lifson
Credits for Educators | University of the Pacific
729 West 16th St. Suite B-3
Costa Mesa, CA, 92627

Make checks payable to: University of the Pacific.

After receiving your Registration Form, *Credits for Educators* will send you a confirmation by email. Please allow a few business days to receive your confirmation.