



Senior-to-Sophomore (STS) Program Course Registration Form

(Registration of courses in the STS Program is NOT considered for admission status to Colorado State University – Pueblo)

High School: Colorado Early Colleges Colorado Springs

Current Grade (Circle One): 9th 10th 11th 12th

Term(s) you are registering for (Check One): Fall Spring Full-Year

PLEASE PRINT**DO NOT USE PENCIL**

SS# N/A **Student PID#:** _____ **Birthday:** ____/____/____ Male Female
Student SS# (if known) Month/ Day/Year

Full Legal Name: _____ **Phone #** _____
Last First Middle

Address: _____
Number and Street City State Zip Code

E-Mail: _____

Ethnic Origin: (Opt.) Hispanic Not Hispanic

Race: (Opt.) Caucasian/White African American/Black American Indian/Alaskan Native Asian/Pacific Islander Other

Fall, Spring or Full Year?	Call No.	Dept. Course No. (Example ENG 101)	Title (Example: English Comp I)	Instructor Initial (Required)	Credits	Tuition Rate \$ Per Credit Hour
					TOTAL:	\$

Student's Signature: _____ **Date:** _____

Parent or Guardian Signature (REQUIRED): _____ **Date:** _____

Extended Studies Office Use Only:							
				Fall Registration Date: _____	by: _____		
				Spring Registration Date: _____	by: _____		
Acct#	Semester	Total Tuition	Total Paid	Payment Method/Check#	Balance Due	Date Deposited	Staff Initials
	Fall						
	Spring						
	Scholarship						

PAYMENT INFORMATION – PLEASE DO NOT SEND CASH PAYMENT

Check/Money Order payable to: CSU-Pueblo

If paying by credit card, please check one: Visa MC Discover

Name written on credit card: Bill CECCS Phone # or e-mail for payment issues: 719-955-4675

Credit Card Number: N/A Expiration Date: N/A CVV: N/A

Student Name: _____

High School: CECCS

PID#: _____