UC San Diego E	Extension
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DATE RECEIVED	

COURSE DESCRIPTION REQUEST		Course description requests are for PREVIOUS quarter courses ONLY . Current quarter course descriptions are available on the website.		Mail to: UC San Diego Extension Student Services
STUDENT ID NUMBER		EMAIL		9500 Gilman Drive, MC 0172S La Jolla, CA 92093-0172
NAME / LAST		FIRST	INITIAL	- -
CONTACT PHONE NUMBER				Fax to: La Jolla (858) 246-1031
COURSE # S	FOTION ID	COLIDER TITLE	OTRWD	Check (if applicable):
COOK 2E # 2	ECTION ID	COURSE TITLE	QTR/YR	Rush (\$20 additional charge, one business day service)
COURSE # S	ECTION ID	COURSE TITLE	QTR/YR	Fax now (\$5 each domestic,
COURSE# S	ECTION ID	COURSE TITLE	QTR/YR	\$10 international charge) FedEx express mail service
Please check the method of del	ivery: Email	Fax Number	Send fax to the Attention of	(\$15 additional charge)
Mail course description to:		Number	Send lax to the Attention of	Student can request up to three course descriptions per request form.
Name of Person / Company				 2. Make checks payable to "UC Regents." 3. Please be sure you have supplied the
Street Address I				correct mailing address. 4. Requests will be processed within
Street Address II				five to seven business days.
City	State		Zip code	For Office Use Only
FEE: \$1		ESCRIPTION	REQUEST	, , , , , , , , , , , , , , , , , , ,
Make checks payable to: UC Reger Visa MC AMEX	nts Discover Diners Club		TOTAL FEES ENCLOSED	Detail Code CRSDSC Total fees paid
CREDIT CARD NUMBER	EXP. DATE		SIGNATURE	OtrYear