Center for Professional Development
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Fresno, CA 93702
1.800.372.5505
559.453.2015
profdev@fresno.edu
ce.fresno.edu/cpd

FRESNO PACIFIC UNIVERSITY

REGISTRATION FORM

Date _____

PLEASE PRINT

❒ Male ❒ Female

Name _____
last first middle

SS# or FPU ID#_____ Birth Date _____

Home Address _____
street Apt. No

_____
city county state zip code

Home Phone Number ( ) _____ School Phone Number ( ) _____

School District _____ Grade Level _____

Email _____ Last Degree Earned _____

Have you ever taken any other course(s) from Fresno Pacific University? Yes / No _____
If yes, previous name(s) used

Course #	Course Title	Units	Instructor

Location of Course (if applicable) _____

Signature of Student_____

Please make checks payable to **Fresno Pacific University**

Charge my ❒ Visa ❒ Mastercard ❒ American Express ❒ Discover

Card #_____

V Code_____ Exp.Date_____

Signature_____

Instructor Validation

_____
Amount paid Date Initials

Check/PO#_____

Student Copy - Pink Instructor Copy - Yellow File Copy - White