Off-Campus Education Programs
Registration/Add Form

Academic program:  
- Master of Arts in Education Administration/Administrative Services Credential
- Master of Arts in Curriculum & Instruction

Please mail or fax application documents to:
By Mail: Concordia University, Attn: Graduate Admissions Office, 1530 Concordia West, Irvine, CA 92612
By Fax: (800) 504-7618

(Please print in blue or black ink)

STUDENT INFORMATION:

Name: ____________________________________________________________________________________________

Student ID: [E] [ ] [ ] [ ] [ ] [ ]
(for office use only at this time)

E-mail Address: ________________________________________ Phone: ______________________________________

PREFERRED CLASS LOCATION:
Cities named below are a general area guideline. Students from any school – public or private – are welcome to apply to any area. Please select the region most convenient for you. (Locations dependent upon enrollment of a minimum of 13 teachers; maximum number of students per group is 27).

- Central OC (Specific class site location TBD)
  Irvine/Tustin/Orange/Santa Ana/Newport Mesa

- South OC (Tentative Site: Laguna Hills H.S.)
  Laguna Hills/SJC/Mission Viejo

- North OC (Tentative Site: Garden Park Elem.)
  Garden Grove/HB/Westminster/Fountain Valley

- Long Beach (Site: 5100 E. Arbor Rd., Long Beach)
  Note: Only C&I program available at this location

- Temecula (Site: 28780 Single Oak Dr., Temecula)
  Note: Only Ed Admin program available at this location

ADD COURSES:

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<tr>
<th>CRN#</th>
<th>Course #</th>
<th>Course Title</th>
<th>Term</th>
<th>Units</th>
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<tr>
<td></td>
<td>EDU * * *</td>
<td>First Course TBA</td>
<td>Fall 2010</td>
<td>3</td>
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Please keep a copy of this form for your records.

By signing below, I understand that this is my final registration and I will be responsible for all charges associated with these courses. I will be enrolled in this course even if I am not yet accepted to the university. I will remain enrolled until all official drop procedures are completed through the Registrar's Office.

Advisor Signature: _____________________________________________________________________________

Student Signature: ______________________ Date: ____________________