WHO MAY APPLY

- Current UC Faculty and Staff

HOW TO APPLY

- Complete both sides of this form
- Present form to the UCI Division of Continuing Education Student Services Office:
  - Fax to (949) 824-2090
  - Drop your form off in person. Our office is open Monday through Friday between 8:30am and 4:30pm. Our office is located at UC Irvine Extension Building D (#234 on the campus map).
  - Mail in the request. Our mailing address is UCI Division of Continuing Education Student Services Office, PO Box 6025, Irvine CA 92616-6025.

ENROLLMENT POLICY

Enrollment for students applying for a 25% reduced fee in course fees will be processed, space permitting, just prior to the start date of the class. Full paying students are always given priority in the enrollment process. The student or department may choose to pay the full fee to guarantee a space in the class, with the option of requesting a 25% refund of fees if the class does not reach its enrollment capacity. The request for a 25% refund must be initiated by the student within one week of the start date of the class. Course with materials fees may not be eligible under the reduced fee program.

UCI Continuing Education reserves the right to exclude from this arrangement certain programs such as Concurrent Enrollment, Summer Session, Clear Induction Administrative Services Credential, Clear Administrative Services Credential, Clinical Research, Comparative Effectiveness, PostBacc, Culinary Arts, CFP Review, Reading Certificate, Montessori Teacher Education, Test Prep and other on campus computer lab courses.

Please choose one of the following enrollment options:

1. Enroll at the full fee to secure a space in the class.
   If the class does not fill, the employee is eligible for a 25% refund of course fees. The employee must contact the Student Services Office one week after the class start date to initiate the refund process. No refunds will be processed after this time.

2. Wait until the class start date for an available opening at the 25% fee.
   Enrollment for students applying for a 25% reduction in course fees will be processed, space permitting, just prior to the start date of the class. Full paying students will be given priority over employees requesting a 25% fee reduction.

I have read the above policy and agree to the terms and conditions for the option which I have indicated above.

Employee Signature

For questions, call the Student Services Office at (949) 824-5414 or email us at dce-services@uci.edu
REDUCED FEE APPLICATION
UC Employees

TO BE COMPLETED BY APPLICANT (please print or type)

INDICATE EMPLOYMENT STATUS:

☐ Faculty ☐ Staff ___ Career ___ Casual

FIRST NAME       MI       LAST NAME

CAMPUS DEPARTMENT & LOCATION DCE Student ID#

JOB TITLE        UC EMPLOYEE ID#

SOCIAL SECURITY NUMBER BIRTH DATE

HOME ADDRESS

CITY       STATE       ZIP CODE

EMAIL

* Please select preferred means of phone contact:

☐ HOME ☐ CELL ☐ WORK

REG#       DEPT/COURSE#       START DATE

HOW DID YOU OBTAIN COURSE INFORMATION:   ☐ CATALOG ☐ WEB ☐ OTHER

PAYMENT SECTION:

☐ FEE RECHARGED TO DEPARTMENT:

AMOUNT TO BE RECHARGED ☐ 25% $___________ OR ☐ 100% $___________

I certify that the applicant named above is a UC employee.

ACCOUNT NAME

CHART       UC CAMPUS (write in campus name)

OBJECT       KFS ACCOUNT#       PROJECT (optional)

DEPT HEAD NAME (PRINT)       DEPT HEAD SIGNATURE       DATE

☐ FEE PAID BY STUDENT:

AMOUNT TO BE PAID ☐ 25% $___________ OR ☐ 100% $___________

PAYMENT OPTION:

☐ Cash ☐ Check ~ MADE PAYABLE TO “UC REGENTS”

☐ MasterCard ☐ Visa ☐ American Express

ACCOUNT NUMBER       EXP (MONTH/YEAR)

CARDHOLDER NAME

BILLING ADDRESS

AUTHORIZING SIGNATURE       DATE

OFFICE USE ONLY:

YR/QTR __________

DATE __________

PROCESSED BY ____