UC RIVERSIDE
University Extension
Professional Studies

UCR University Extension
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UNIVERSITY OF CALIFORNIA, RIVERSIDE EXTENSION APPROVAL FOR CONCURRENT ENROLLMENT

QUARTER/YEAR _____ SIS I.D.# _____

Name _____
LAST FIRST PHONE E-MAIL ADDRESS

Address _____
NUMBER & STREET CITY STATE ZIP

☐ I am currently a registered UCR student or have been one in the past.
☐ I am planning to apply to UCR.
☐ I will be transferring credit from this course to another school.

I am a U.S. citizen: ☐ YES ☐ NO
Type of Visa _____
School: _____

For the Student: Course Information ☐ FOR A LETTER GRADE ☐ A S/NC BASIS

Course Title: _____

Department/Course Number: ☐☐☐☐ ___ ☐☐☐☐ (Example: CHEM 001A/01LA)

Course Type: ☐☐☐ Section: ☐☐☐ CRN Number: ☐☐☐☐☐ (Example: Lec 001 11922)

Course Type: ☐☐☐ Section: ☐☐☐ CRN Number: ☐☐☐☐☐ (Example: Dis 005 11926)

Department: ☐☐☐☐ **Course Number:** ☐☐☐☐ **Course Type:** L A B **Section:** ☐☐☐ **CRN:** ☐☐☐☐☐ (Example: LAB 006 23872)

NOTE: If there is a lecture and discussion/lab for the course you must supply BOTH numbers.

Reason for Enrolling:

☐ UCR graduate (year_____) ☐ Former UCR student – dismissed ☐ UCR student — last class
☐ Former UCR student — lapsed ☐ Visiting student ☐ Personal enrichment ☐ Other_____

If previous UCR student (Dismissed/Lapsed), what college are you planning to attempt readmission into? _____

I acknowledge as a Concurrent Enrollment Student that I must adhere to all policies and regulations regarding student conduct, discipline, sexual harassment, substance abuse and nondiscrimination as prescribed by the University of California Riverside. **http://deanofstudents.ucr.edu/policies**
I affirm that I have reviewed and meet the prerequisites/corequisite requirements of courses attempting to enroll via Concurrent Enrollment and have submitted academic records as proof. *Students should visit* **https://classes.ucr.edu/** *to view the prerequisites/corequisite tabs for each course prior to submitting enrollment forms quarterly.*

Students must submit Concurrent Enrollment forms to **ConcurrentEnrollment@ucx.ucr.edu**, along with any required supporting documentation, as described on our Concurrent Information Page: **https://extension.ucr.edu/helpcenterstudentresources/registration/concurrentenrollment**. Prospective students must adhere to attendance policies as set forth by campus colleges. Submitting a Concurrent Enrollment Form does not guarantee approval; enrollment is finalized only after a form is officially approved by all required campus signers and the student's required fees have been paid in full to University Extension on a course-by-course basis.

NOTE: UCR University Extension International Program students should adhere to their specific program guidelines regarding submitting forms to appropriate UCR University Extension Academic Advisors.

STUDENT SIGNATURE _____ DATE _____

For the Designated Campus First Level Approver (Enrollment Manager):

Please note that before accepting concurrent participants it is your responsibility to assess the capacity of the class to ensure that space is available for regularly enrolled students. Matriculated students have priority over concurrent enrollees.

This student has my permission to enroll in the course indicated above.

DESIGNATED CAMPUS APPROVER'S NAME (ENROLLMENT MANAGER) — PLEASE PRINT _____

DESIGNATED CAMPUS APPROVER'S SIGNATURE (ENROLLMENT MANAGER) _____ DATE _____

Associate Dean's Approval Required: ☐ Former UCR Student ☐ Current UCR Student ☐ More Than One Course
(College Office – Secondary Level Approval)

ASSOCIATE DEAN'S SIGNATURE _____ DATE _____

College of HSS CNAS EGR School of EDUC GSM Grad Div.

Refund Policy (Follows Campus Policy):
Withdrawing on or after first day of instruction:
2-7 calendar days.....90% of refundable fees
8-18 calendar days.....50% of refundable fees
19-35 calendar days.....25% of refundable fees
36+ calendar days.....0% of refundable fees

Grading: At the end of the quarter, instructors should utilize iGrade to post your final grade under the "View Extension Students" tab. Concurrent Enrollment students will not appear on the regular class roster.

For Office Use Only:

units _____ fee _____ method of payment (Ck#, Credit Card, Cash) _____

date _____ by _____

Trans # _____ Section # _____

Reference I.D # _____

Rev. 03/2020UCR

v5.9.3.25