UNIVERSITY OF THE PACIFIC
University College

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<th>CRN</th>
<th>Semester</th>
<th>Course #</th>
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<td>11291</td>
<td></td>
<td>201965</td>
<td>PEDD 9032 Integrated Science (Science Olympiad)</td>
<td>2 PDU</td>
<td>Gerard Putz</td>
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Please Print Clearly Please fill in ALL information Gender: ___ M ___ F

Student I.D. ____________________________ OR Social Security Number: ____________________________

Last Name: ____________________________  First Name: ____________________________  MI: _________

Street Address: _________________________________________________________________

City: ____________________________  State: _________________  Zip: _________________

Daytime Phone: (______) ____________________________  Evening Phone: (______) ____________________________

Date of Birth (Mo/Day/Year): _____/_____/_______  US Citizen: _______ Yes _______ No

Email: ____________________________

Have you previously attended Pacific? ____________________________  Year attended: ____________________________

Name while you attended: __________________________________________________________

Current Pacific Students

School or College: _________________________________________________________________

Major(s): ____________________________  Advisor: __________________________________________________

Status: ____________________________  Anticipated Date of Graduation: ____________________________

Optional Information:

_____ African American  _____ Asian/Pacific Islander  _____ Hispanic

_____ Native American  _____ White/Non-Hispanic  _____ Other

For Office Use Only:

Date: ____________________________  Received by: ____________________________  Course Code: PEDD 9032

Form of Payment: ____________________________  Amount: ____________________________  Activity Code: ____________________________
Type of Credit: Professional Development

Payment Information

Date: __________________________

Last Name: _________________________________________
First Name: __________________________

_____ Check. Make payable to University College/Pacific.

_____ Visa _____ AMEX _____ MasterCard _____ Discover

Course Fee: $190 2 PD Units

Amount Enclosed or Authorized:

Card Number: ________________________________________ Exp. Date: _______________

Cardholder Name: ___________________________ Signature: ______________________

Declined Checks: There will be a $25 charge for all checks returned for insufficient funds.

Course Requirements: In order to receive credit, participants must complete the following:

1. Fill out this Registration Worksheet and payment information.
2. Attend all course sessions and complete all course assignments.
3. Students may request an official transcript by contacting the University’s Registrar at 209-946-2135 or via web link http://www.pacific.edu/About-Pacific/AdministrationOffices/Office-of-the-Registrar.html
4. All grades are posted to student records at the end of each University semester.
5. Receipt of payment and/or grade reports available upon request.

University of the Pacific was founded in 1851 as California’s first chartered institution of higher education. The University is independent, co-educational, and fully accredited by the Western Association of Schools and Colleges (WASC). The main campus is located in Stockton.