



# INTERNATIONAL TECHNOLOGICAL UNIVERSITY

355 W. San Fernando St, San Jose, CA 95113

Phone: (888)488-4968 Fax: (408)331-1026

Web: <http://www.itu.edu>

Clear Form

## REGISTRATION FORM

Name (Last, First): \_\_\_\_\_ Student ID: \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Degree Level:  MBA  MS  Ph.D

Degree In: \_\_\_\_\_

Semester:  Fall YEAR \_\_\_\_\_  Spring YEAR \_\_\_\_\_  Summer YEAR \_\_\_\_\_

Please indicate the following:

H1/H4 Visa:

Semester Break

Last Semester

**CPT I-20**

Office Pick-up

Mail Out

Course #	Course Title	Units	Day	Instructor
Total Units:		<input style="border: 2px solid black;" type="text"/>		

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Registrar Signature \_\_\_\_\_ Date \_\_\_\_\_

**Disclaimer:** Registration forms will not be accepted without payment, all fields need to be filled out completely.



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## REGISTRATION FORM

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Name(Last,First): \_\_\_\_\_ StudentID: \_\_\_\_\_

Registration Fee:           **\$ 25    \$50    \$100**

Tuition:                   \$ \_\_\_\_\_

Computer Lab Fee:       \$ \_\_\_\_\_

Student Association Fee: \$ \_\_\_\_\_

Other Fees:               \$ \_\_\_\_\_

**TOTAL CHARGES**         \$ \_\_\_\_\_

### **REGISTRATION FEES:**

**\$ 25** Pre-Registration

**\$ 50** Registration

**\$ 100** Late Registration

### Student Agreement:

By signing this form you agree to the following statements:

1. You have fully read and understand the Student's Code of Conduct as stated on the Student Handbook and ITU Website.
2. You are responsible for all of your financial obligations, tuition, and fees.
3. You understand that this agreement is not binding unless signed by you, the student.
4. Any complaints, questions or problems concerning this school which have not been satisfactorily answered or resolved by the school should be directed to the California Postsecondary Education Commission ([www.cpec.ca.gov](http://www.cpec.ca.gov))

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Advisor: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Registrar: \_\_\_\_\_

Date: \_\_\_\_\_