



American Language Program

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IELTS Preparation Course

Application for Enrollment

PLEASE TYPE, PRINT OUT, AND SAVE FOR YOUR FILES

Name

Family Name: _____
Given Name(s): _____
Middle Name(s): _____

Permanent Address

Address: _____
City: _____ State: _____ Postal Code: _____
Telephone number: _____
Contact email: _____

Course Start Date

Please indicate which class session you want to apply for:
Year: _____ Class session: _____

Course Registration Fee: \$ 250.00 U.S. Dollars

Payment by certified bank draft, cashier's check, money order (made payable to CSUEB) or credit card (Visa or Mastercard only) for \$250 U.S. dollars must be sent with this application.

I hereby authorize CSUEB to debit my VISA/MASTERCARD (circle one) card:

Credit Card Account #: _____ - _____ - _____ - _____

Expiration Date: ____ - _____

Billing address: _____

Name of cardholder: _____

Signature of cardholder: _____

HOW DID YOU FIND ABOUT THE PREPARATION COURSE?

WEBSITE (NAME): _____

ALP STUDENT (NAME): _____

OTHER: _____