

# APPLICATION FOR INTRASYSTEM VISITOR ENROLLMENT

This application is to be used by California State University students in state-supported program who wish to enroll as a visitor at  
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\$, & ( IRUP

## PART I. TO BE COMPLETED BY STUDENT

### (A) STUDENT INFORMATION

1. Home CSU \_\_\_\_\_ 2. Student ID# \_\_\_\_\_

3. Legal name \_\_\_\_\_  
Last First Middle Maiden

4. Social Security #\* \_\_\_\_\_ 5. Date of birth \_\_\_\_\_

\* 1RW XVHG DV DQ , ' QXPEHU DQG ZLOO QRW EH FRPPXQLFDWHG\* WRe OSK LUG SDUW\ Date F  
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### (B) PROPOSED ENROLLMENT

1. Host CSU \_\_\_\_\_ 7HURHQUROO)DQDW6SULQJ

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/ L V W R R X U V S O D Q W R F V P S X W X G R Q V Z N W K B G Y L W R Q V X F R X U V H F Z  
needed requirements.

Course(s) at Host CSU

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