

**COURSE DESCRIPTION REQUEST FORM**

California State University, Chico  
Student Records & Registration  
California State University, Chico  
Chico, CA 95929-0720

Email: [Registrar@csuchico.edu](mailto:Registrar@csuchico.edu)

Phone: (530) 898-5142 Fax: (530) 898-4359

- Course descriptions for classes offered **fall 2001 to present** are online: [www.csuchico.edu/catalog/library.html](http://www.csuchico.edu/catalog/library.html)
  - Course descriptions for classes offered **prior to fall 2001** are available by request using this form.
- Please complete as much of the information below as possible and submit completed request via fax or mail.

**Student Information** (optional)

Name \_\_\_\_\_ CSU, Chico ID \_\_\_\_\_  
Last First M.I.

Other Names Used \_\_\_\_\_ SSN XXX-XX-\_\_\_\_\_  
Last four digits only

Birth month and/or day \_\_\_\_\_ / \_\_\_\_\_  
Month Day

**Course Descriptions**

Course	Number	Semester Taken
Example: ENGL	124	F 99
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Requestor Contact Information**

Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Email \_\_\_\_\_

**Delivery Method** (Select One)

- US Mail \_\_\_\_\_
- Fax No (\_\_\_\_\_) \_\_\_\_\_
- Email: \_\_\_\_\_
- Pick Up – SSC 110