

COURSE DESCRIPTION REQUEST FORM

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

Email: 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
 - 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