

San Francisco State University
College of Extended Learning

Post-Registration Payment Coupon

Complete and bring in this form. Full Payment must be received by your CEL Touchtone due date. If payment is not received by your due date, your registration will be canceled.

1. Fill in this section with information SF State Bursar's Office needs to accurately process your payment by check or money order.

2.

SFSU ID Number _____ - _____ - _____ Phone Number: (_____) _____ - _____

Last Name First Name Middle Initial

Address – Number, Street and Apartment if applicable

City State Zip Code

Date of Birth: _____ Email Address: _____
Month Day Year

3. Fill in the amount due and due date. This information will be given to you when you register. If you have forgotten your due date or amount due, call the College of Extended Learning at (415) 405-7700.

Amount Due: _____ Due Date: _____

4. Check type of payment, complete all required information, and enclose your check or money order (no cash).

Check # _____ Account Holder Name: _____

The check you enclose must be bank-imprinted with account holder's name and address. Include student name and SFSU ID number on the front of the check. **Make checks payable to SFSU-CEL** or SFSU-College of Extended Learning.

Money Order or Cashier's Check.

Make payable to SFSU-CEL or SFSU-College of Extended Learning. Include student name and SFSU ID number on the front of the money order or cashier's check.

We cannot accept credit card payments in person. To pay online using a credit card or an eCheck, please go to www.sfsu.edu/~bursar. To pay over the phone with a credit card, please call (869)769-2105.

5. Read and Sign Below

I agree to abide the academic, payment and refund policies governing these courses as printed in the College of Extended Learning catalog. If my payment by check or credit card is not paid by the bank, I am still responsible for all course fees. Refunds must be requested by calling CEL at (415) 405-7700 during office hours at least one day before the course begins.

Signature _____ Date _____

6. Bring this coupon with full payment to the College of Extended Learning at the SF State Main Campus at 1600 Holloway, One Stop Student Services Center, San Francisco, CA 94132, OR the SF State Downtown Campus at 835 Market, 6th Floor, San Francisco, CA 94103. Please do not mail your registration payment. It is possible your payment will not be delivered within five days and you will be dropped from your courses.