

# ENROLLMENT (FORM)

Please Print

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_ CN o202 (\_\_\_\_\_)JTJ 0.012 Tw 612.4 (. )

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My signature acknowledges I understand and agree that my registration obligates me prior to Cleveland State University for all tuition charges and fees associated with my course enrollment and I acknowledge an

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FOR REGISTRATION DEADLINES, PLEASE VISIT [WWW.CSUOHIO.EDU/REGISTRAR](http://WWW.CSUOHIO.EDU/REGISTRAR)  
All registration transactions must be done prior to stated deadlines.  
Rev. 0 / 0