



***Student Fee Waiver Request***  
**OVER 60 PROGRAM**

This waiver form **must be submitted to the Office of the Registrar in UH-171.**

(Please Print Clearly)

NAME: \_\_\_\_\_ COYOTE ID#: \_\_\_\_\_  
                    Last                      First                      Middle

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: Home (\_\_\_\_\_) \_\_\_\_\_ Work/Cell (\_\_\_\_\_) \_\_\_\_\_

CSUSB EMAIL ADDRESS: \_\_\_\_\_@coyote.csusb.edu

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_  
                            mm        dd        yyyy

SEMESTER & YEAR FOR WHICH YOU ARE APPLYING: Semester \_\_\_\_\_ Year \_\_\_\_\_

DEGREE OBJECTIVE: (please circle one) BA / BS / MA / MS / MBA / MPA; Other \_\_\_\_\_

MAJOR: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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(Please detach this bottom portion and keep for your records)

**REGISTRATION INFORMATION**

Students enrolling in the program will be able to register using the myCoyote online registration system and will be assigned an Enrollment Appointment to register for classes through their myCoyote Student Center.

If a student applies to this program after Enrollment Appointment period has ended, they will then register during the open enrollment period, which requires the pre-payment of fees.

For further information about the Over 60 Fee Waiver Program for California residents please contact the us at (909) 537-7671 or by email us at [registrationhelp@csusb.edu](mailto:registrationhelp@csusb.edu).

To submit this request by mail, please address to:

Attn: Over 60 Coordinator  
Office of the Registrar, UH-171  
California State University, San Bernardino  
5500 University Parkway  
San Bernardino, CA 92407