



## Course Description Request

Date: \_\_\_\_\_

Name: \_\_\_\_\_

SFSU ID: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Course discipline and number: \_\_\_\_\_

Course title: \_\_\_\_\_

Bulletin year: \_\_\_\_\_

Course discipline and number: \_\_\_\_\_

Course title: \_\_\_\_\_

Bulletin year: \_\_\_\_\_

Course discipline and number: \_\_\_\_\_

Course title: \_\_\_\_\_

Bulletin year: \_\_\_\_\_

Mailing address if different than above:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**\*Cost per course description: \$2.00**

**\*Submit form and payment to address above or, if submitting in person, submit payment to the Bursar and form to the Registrar at the One Stop Student Services Center in the Student Services Building.**

**\*Make checks payable to: San Francisco State University**

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*Office Use Only*

Account: 501112

Fund: TS940

Dept: 6145