



UCSB Summer Sessions 2009

Application for UCSB Career Staff Discount

The Summer Sessions Office will reimburse \$115 per unit for each paid unit for all eligible UCSB career staff employees, subject to the eligibility guideline below. You are also subject to any rules and regulations outlined in the current UCSB Summer Sessions catalog. Please note that fees are proposed pending approval.

Eligibility: You must be a UCSB career staff employee who is past the probationary period.

Staff with a UC Student Status: UCSB Students are defined as students continuing from spring quarter, or a returning student who would be eligible for readmission in Fall quarter. **Non-UCSB students** are students who are visiting from other institutions and taking classes only during the Summer Sessions. If you are a Non-UCSB student, you will have to pay the \$140 nonrefundable application fee.

To register for one or more classes, simply follow these steps:

1. Obtain a UCSB Summer Sessions catalog.
2. Complete the application form in the catalog or downloadable from the web.
3. Complete this form. Have your supervisor certify this form.
4. Bring or mail all forms to the Summer Sessions Office— 2214 SAASB, by 5 p.m., June 15, 2008. Don't forget to include your \$140 nonrefundable application fee if you are a Non-UCSB student. (Check made payable to UC Regents)

Payment and Reimbursement Procedure:

1. Pay your fees in full to the BARC Office on or before June 15, 2009
2. Summer Sessions will then credit your BARC account with \$115 per unit for each paid unit, as soon as possible, after June 26, 2009.

Name: (Last, First, Middle) _____

Employee Number: _____ Title: _____

Department: _____ Phone: _____

I certify that the above information is accurate and complete.

Employee Signature: _____ Date: _____

Supervisor Certification

I certify that the above named employee meets the condition for the staff employee discount and if necessary, an alternate work schedule has been arranged.

Supervisor Name: _____ Title: _____

Supervisor Signature: _____ Date: _____ Phone: _____