

2008-2009 CSET PREP REGISTRATION FORM

Last Name: _____

First Name: _____

SD Unified School District Employee? _____ **Employee ID #** _____
(If other than SDUSD, a \$60.00 registration fee* applies; checks only.)

School Site: _____

School Phone Number:() _____ **Home/Cell Number:()** _____

E-Mail Address: _____

Please check the test date you will be taking CSET:

- May 16**
- July 18**

Are you:

- Certificated**
- Classified**
- Out of District**
- Student**
- Other** _____

Please check the CSET Prep Class you will be attending:

- Multiple Subjects**
- Single Subject English**
- Single Subject Mathematics**
- Single Subject General Science, plus check one of the following:**
 - μ Biology**
 - μ Chemistry**
 - μ Physics**
 - μ Geoscience**

Registration deadline for April /May series: April 16, 2009

If you are interested in earning Salary Advancement Credit (SDUSD teachers only), information will be presented on registration night.

Complete Registration Form and mail or fax to:

**Lucy Del Valle
Education Center
4100 Normal St. Room 2038
San Diego, CA 92103**

**Fax: (619) 692-3504
Phone: (619) 725-7142**

*Please note: Due to district policy, **cash payments cannot be accepted for books or for registration.** Payments for classes/books must be made by check, payable to **“San Diego Education Fund.”**