



Which session are you registering for? Enrollment due

- Session I: June 25 - August 4 **JUNE 9**
- Session II: August 6 - September 14 **JULY 21**
- Full Summer: June 25 - September 14 **JUNE 9**

Note: Housing deadlines are earlier.

1. STUDENT INFORMATION: Please use your full legal name and write clearly.

UCI ID# _____ UCI MAJOR _____

LAST _____ FIRST _____ MIDDLE _____

STREET _____

CITY _____ STATE _____ ZIP _____

STUDENT CELL PHONE () _____ ALTERNATE PHONE () _____

STUDENT EMAIL (required) _____ ARE YOU AN INCOMING UC IRVINE TRANSFER? YES NO

BIRTHDATE / / SOC SEC # - - SEX M F

MONTH DAY YEAR

SCHOOL(S) YOU ARE TRANSFERRING FROM: _____ CLASS LEVEL AS OF FALL 2017? SOPH JR SR

WILL YOU BE RECEIVING UC IRVINE SUMMER FINANCIAL AID? YES* NO
 *If yes, students need to amend their 2016-2017 FAFSA information to include UC Irvine as a school and apply for UC Irvine Summer Financial Aid, 1 business day before submitting form. Visit www.ofas.uci.edu

2. HOUSING: Housing is optional but strongly recommended.

Will you submit a housing contract to live in Transfer Edge housing during the program?* Session I Session II Full Summer NO

*You must register and pay for housing via a separate housing contract. Students who mark "YES" will receive directions to register for housing via e-mail alongside their welcome information. Housing contract and payment are due **MAY 26** for Session I and Full Summer and **JUNE 30** for Session II. Space is limited.

3. COURSES:

TRANSFER EDGE COURSES: SOC SCI 89: Transfer Summer Seminar (2-units) is required and available exclusively to Transfer Edge students to help lay a solid foundation for your university success. Enrollment in **SOC SCI 89** is required during the first summer session you choose to attend; concurrently, most students will enroll in one additional course. Please include at least one alternate choice course per session in the chart below. Keep in mind that a full load for a summer session is 6 - 8 units per session.

SESSION	COURSE DEPT & NUMBER	5 DIGIT COURSE CODE	UNITS	LETTER GRADE, P/NP, AUDIT	COURSE FEE* (\$273/unit)	MATERIALS FEES**
	SOC SCI 89 (M,W 11am - 12:50pm)		2.0		\$546	\$0
	alternate choice					
	alternate choice					



4. FEES PAYMENT:

TRANSFER EDGE FEES:

$$\begin{matrix} \text{Sum of} \\ \text{COURSE FEES*} \end{matrix} \quad + \quad \begin{matrix} \text{Sum of} \\ \text{MATERIALS FEES**} \end{matrix} \quad + \quad \begin{matrix} \text{MANDATORY CAMPUS FEE} \\ \$175 \text{ (non-refundable)} \end{matrix} \quad = \quad \begin{matrix} \text{TOTAL} \\ \text{FEES DUE} \end{matrix}$$

PAYMENT: CHECK/MONEY ORDER ENCLOSED, payable to UC REGENTS VISA MASTERCARD AMERICAN EXPRESS

CARD NUMBER: _____ AMOUNT TO CHARGE (US\$): _____ EXPIRATION DATE: _____

CARDHOLDER'S NAME: _____ SIGNATURE: _____

STREET: _____ CITY: _____ STATE: _____ ZIP: _____

5. STUDENT SIGNATURE: Sign, date, and mail or drop-off to UCI Summer Session by:

Session I: **JUNE 9** Session II: **JULY 21** Full Summer: **JUNE 9**

Note: Housing deadlines are separate, and earlier in the year. Refer to Section 2 of this form.

I hereby enroll in 2017 UCI Transfer Edge. I have read and understand the UCI Summer Session policies (www.summer.uci.edu/services and also available at the Summer Session Office) regarding registration, fees and refunds. I understand that the mandatory campus and materials fees are non-refundable. I understand that photos and videos of me may be taken during the course of my program and give permission for those photos to be used by the Transfer Edge website and other marketing materials.

STUDENT SIGNATURE: _____ DATE: _____

DELIVER YOUR COMPLETED REGISTRATION & PAYMENT:

<p>by MAIL</p> <p>UCI Summer Session/TRANSFER PO BOX 6050 IRVINE, CA 92616-6050</p>	<p>in PERSON (Mon-Fri 8am - 5pm)</p> <p>UCI Summer Session Summer Session, Bldg A Bldg #231 on the campus map</p>	<p>QUESTIONS?</p> <p>Contact our office at (949)824-7649 or email: summer-transfer@uci.edu</p>
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The University of California, in accordance with applicable Federal and State laws and University policy, does not discriminate on the basis of race, color, national origin, religion, sex, disability, age, medical condition (cancer-related of genetic characteristics), ancestry, marital status, citizenship, sexual orientation, or status as a Vietnam-era veteran or special disabled veteran. The University also prohibits sexual harassment. This nondiscrimination policy covers admission, access, and treatment in University programs and activities.

*COURSE FEES for Summer Session are pending in the state budget and approval by the Regents of the University of California. Fees may be re-assessed if your student status for the Fall is changed. Your student status is subject to verification by the UCI Registrar.

**Some courses require an additional non-refundable MATERIALS FEE. See course descriptions on the UCI Summer Session website for more details.

Participant's name: _____
Please Print

UNIVERSITY OF CALIFORNIA,

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Waiver: In consideration of being permitted to participate in any way in

hereinafter called "The Activity", I, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents**, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Activity.

Signature of Parent/Guardian of Minor Date Signature of Participant Date

Assumption of Risks: Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

Signature of Parent/Guardian of Minor Date Signature of Participant Date