

2017 STAFF DISCOUNT FORM

Berkeley Summer Sessions

1995 University Avenue, Suite 130 (MC 1080)
Phone: 510-642-5611 • Fax: 510-664-9825
summer@berkeley.edu

Berkeley Summer Sessions would like to invite current career, casual, or partial year employees at any UC campus to participate in our summer program at a reduced cost. Save the cost of the Summer Sessions Registration Fee (\$380.00) and take advantage of the chance to attend courses when work schedule or cost might otherwise make attendance difficult. It is our way of saying thanks to dedicated employees for maintaining such an outstanding university.

Current career, full-time casual, or partial year employees at any UC campus, lab, or the Office of the President are eligible. Long-term temporary staff with appointments longer than six months are also eligible. You will need the approval of your immediate supervisor, who will certify your eligibility. **Employees who are also continuing UC Berkeley students and researchers who have "courtesy appointments" without salary are NOT eligible.**

Just complete this form and send it to Berkeley Summer Sessions, 1995 University Ave., Suite 130 (campus mail code 1080), with your Berkeley Summer Sessions application form for visiting students and your most recent earnings statement or payroll stub. You will be billed for the course fee listed on our webs (summer.berkeley.edu), and the \$55 document fee if applicable. We will waive the \$380.00 Registration Fee (You may choose to make the full payment by applying online. We will refund \$380.00 provided that you qualify for the waiver).

NOTE: If you cancel from Berkeley Summer Sessions prior to the "Cancel Registration" deadline, you will be refunded all but the \$100 non-refundable Cancellation Fee. If you withdraw *before* the "Drop or Withdraw for a Refund" deadline, all fees except for the \$380.00 Registration fee will be refunded. If you withdraw *after* the "Drop or Withdraw for Refund" deadline, you will receive no refund. You can find the Deadline Calendar from our website (summer.berkeley.edu).

THIS SECTION IS COMPLETED BY THE EMPLOYEE

*** ALL FIELDS ARE REQUIRED**

Name		Employee ID #
Position		For How Long?
Address		Which Campus?
Daytime Phone	Evening Phone	E-mail Address

I certify that the above information is true.

Signature

Date

THIS SECTION IS COMPLETED BY THE IMMEDIATE SUPERVISOR

I certify that the named employee meets the eligibility requirements for the Berkeley Summer Sessions Staff Discount.

Signature

Title

Extension

Date

OFFICE USE ONLY

Status Verified

SID

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Signature

Date

EMERGENCY CONTACT INFORMATION

Berkeley Summer Sessions | 1995 University Ave., Suite 130, Berkeley, CA 94704 | Fax: 510.664.9825 | E-mail: summer@berkeley.edu

PERSONAL INFORMATION

* Required Field

Student Name*

Student E-mail*

Student Phone Number*

EMERGENCY CONTACT 1

* Required Field

First Name*

Last Name*

Relationship*

E-mail*

Phone Number*

Alternate Phone Number

EMERGENCY CONTACT 2

* Required Field

First Name*

Last Name*

Relationship*

E-mail*

Phone Number*

Alternate Phone Number

EMERGENCY CONTACT INFORMATION RELEASE AUTHORIZATION

Under the Federal Family Education Rights and Privacy Act of 1974 and provisions of state law relating to public records disclosure, the University of California Policies Applying to the Disclosure of Information from Student Records and the Berkeley Campus' implementation of that policy assure that student information is protected.

In case of an emergency, it may be necessary to access and release your information protected by the aforementioned law and policies. By checking this box, you are giving your written consent to access and release relevant information to appropriate parties connected with the emergency.