The CSUSB Inland Counties Math Project, a branch of the California Mathematics Project, will conduct an institute in Algebra and Number Theory to review the mathematics content covered on the CSET subtest I. Participants will receive various materials for this class. The registration fee is $350.00, which covers the workshop, materials, parking, dinner and refreshments.

To register, please click on the link below and fill out all required fields:

**CSET I Fall 2015 Registration**

or **SCAN QR code below.**

If you do not receive a confirmation email within 2 business days of submission of your registration, please contact our office at (909) 537-5455 or by email at szayas@csusb.edu. Registration is tentative pending submission of PO or payment, and receipt of confirmation.

**REGISTRATION DEADLINE**

**September 18, 2015**

**When:** Sept. 30 - Dec. 9, 2015

**Note:** Institute will meet from 4:30-8:30pm on the following days:

- Wednesday, September 30
- Wednesday, October 7
- Wednesday, October 14
- Wednesday, October 21
- Wednesday, October 28
- Wednesday, November 4
- Wednesday, November 18
- Wednesday, November 25
- Wednesday, December 2
- Wednesday, December 9

**Cost:**

$350.00

**Where:**

California State University, San Bernardino
Room: TBD

**Instructor:**

Dr. Min-Lin Lo

**Credits:**

Four Math quarter units of College of Extended Learning

**Please choose ONE of the following payment options:**

1. **PO/District Support Letter**
   - A. If your fees will be paid by your district, have them fax or mail us a completed District Support Letter. Our fax number and mailing address are located at the bottom of this page.
   - B. The District Support Letter is located on the second page of this document.

2. **Check**
   - A. Please make your check payable to University Enterprises Corporation at CSUSB.
   - B. Mail your check to the address listed at the bottom of this page.

3. **Credit Card**
   - A. To obtain a Credit Card Charge form use the following link: [Credit Card Form]
   - B. Please mail us a completed Credit Card Charge form to the address listed at the bottom of this page.

WILL NOT ACCEPT FAXED COPIES OR MAILED COPIES. MUST MAIL THE ORIGINAL.
District Support Letter

On behalf of Unified School District, I support ________________________’s application to participate in the program offered by the Inland Counties Math Project (ICMP).

We confirm that this applicant follows district regulation for registration.

This District Support Letter guarantees the $350 co-payment.

The Purchase Order number is ________________________________.

OR

The PO will be supplied to ICMP by February 9th, 2015.

Name of Institute: CSET I: Algebra and Number Theory (Spring 2015)

Signature: ________________________________

Title: ________________________________

(Assistant Superintendent of Curriculum, School Principal, or equivalent, or representatives.)

Printed Name ________________________________ Date __________________

Telephone number: ________________________________

Email Address (please print clearly) ________________________________

Either fax this letter to (909) 537-7006 or mail it to:

   Inland Counties Mathematics Project
   Department of Mathematics
   California State University San Bernardino
   5500 University Parkway
   San Bernardino, CA 92407

Please make all checks out to University Enterprises Corporation at CSUSB