

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 \$400.00, 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 2017 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****

****August 25, 2017****



**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.

When: Sept. 11 - Oct. 11, 2017

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

Monday, September 11
Wednesday, September 13
Monday, September 18
Wednesday, September 20
Monday, September 25
Wednesday, September 27
Monday, October 2
Wednesday, October 4
Monday, October 9
Wednesday, October 11

Cost:

\$400.00



Where:

**California State University,
San Bernardino
Room: TBD**

Instructor:

Dr. Min-Lin Lo

Credits:

**Four Math quarter units of
College of Extended Learning**

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 \$400 co-payment.

The Purchase Order number is _____,

OR

The PO will be supplied to ICMP by August 25th, 2017.

Name of Institute: CSET I: Algebra and Number Theory (Fall 2017)

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