



CSE Summer Program for Incoming Students (SPIS)

9500 Gilman Drive MC 0404  
La Jolla, California 92093-0404  
Fax: 858-534-7029

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DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

If the person named above is a minor, a parent or legal guardian must complete the following:

DATE: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_