

UC Counselor Conference registration fields

* denotes a required field + denotes a field for in-person registration only

*Conference site

Tuesday, September 3 – Virtual
Thursday, September 5 – Riverside
Tuesday, September 10 – Sacramento
Thursday, September 12 – Redding

Attendee details

*Email address:

Please note, you will need to provide a unique email address for each counselor you register.

*First name:

*Last name:

+Preferred pronouns:

+If other, specify:

*Employer type:

Public high school School CEEB code:
Private high school School CEEB code:
Community based organization (CBO)
Independent/private counselor
International high school or program Country:
UC campus program (e.g., EAOP) UC campus affiliation:

*School, organization or program name:

*School, organization program location (city, state):

*Job title:

*Years of experience preparing students for college admission:

Dietary needs (*in-person only*)

*+ Please specify any dietary restrictions:

None Gluten-free Nut allergy Vegan Vegetarian Other

If other, specify:

Stay connected

*Have you attended a previous UC High School Counselor Conference, whether in-person or virtually?

Do you subscribe to the [UC Counselors and Advisers Bulletin \(CAB\)](#)?

If not, would you like to automatically be subscribed?

*UC campuses would like to share information with you on future events and trainings for the counseling community. Would you like your contact information to be shared with UC campus admissions offices? Your information will not be shared for any other purpose or with any other party.