

Student Business Services

How to Create a Parent Pin

Enrollment Center – Sage Hall Phone: (805) 437-8810 Email: sbs@csuci.edu

- 1. Login to myCl Portal.
 - Dolphin Name and Password are case sensitive
 - If you forgot your password, click on "Forgot Password."

Channel Islands / myCl	
	Welcome to myCl
Dolphin Name	
Dolphin Password	
Sign I	n
Forgot Password? Forgot Dolp	hin Name? Help

2. Locate and click on the 'CI Records' tile.

Pinned Services (What's this?)





3. In your Student Center go to the Finances section select 'Make a Payment'.



4. Click on the 'Login to CASHNet' button.

Make a payment		
Due dates are strictly enforced. Please details. **Fees are subject to change	e visit <u>www</u> at anytime	<mark>1.csuci.edu/sbs</mark> for complete based on budget needs.**
You owe 3,074.00.		
Due Now	3,074.00	
Future Due	0.00	
** You have a past do	CashNet	3,074 00. **

The CSU makes every effort to keep student costs to a minimum. Fees listed in published schedules or student accounts may need to be increased when public funding is inadequate. Therefore, CSU must reserve the right, even after fees are initially charged or initial fee payments are made, to increase or modify any listed fees. All listed fees, other than mandatory systemwide fees, are subject to change without notice, until the date when instruction for a particular semester or quarter has begun. All CSU listed fees should be regarded as estimates that are subject to change upon approval by the Board of Trustees, the Chancellor, or the Presidents, as appropriate. Changes in mandatory systemwide fees will be made in accordance with the requirements of the Working Families Student Fee Transparency and Accountability Act (Sections 66028 - 66028.6 of the Education Code).



5. Select the **'My Account'** link in the margin.



6. Select the 'Send a payer invitation' link.

Payers

iccount!	ke to help you pay? Invite them to have access to your		
• Send a payer invitation			
Privacy & terms			
Use of personal information		View	



7. Enter **'Payer Information'**, confirm email address, and accept terms and conditions.

My Account	
Payer Invitation	
Payer information	
* First name	
1) First name required	
* Last name	1
(1) Last name required	
* Email address	
	1
() Email address required	
* Confirm email address	1
Payer access	
By sending this invitation, I hereby authorize this payer to access my account information and/or make payments.	
Allow access to statements	
Message to payer	

8. Select 'Send Invitation' to complete request.

