Cross College Alliance
Rethinking education. Together.

# Cross-Registration Application

Spring, 2018 -- Due November 22

## 1. Personal Information

Name: _____ _____ _____ Preferred Name: _____
(Last) (First) (Middle)

Local Mailing Address: _____ SSN: _____

_____ _____ _____ Date of Birth: _____
(City) (State) (Zip) Campus Email: _____
Phone:

Home Institution: _____ Student ID# at Home Institution: _____

Are you graduating Spring 2018? Yes ☐ No ☐

U.S. Citizen? Yes ☐ No ☐

If foreign, of which country are you now a citizen?: _____
Alien registration receipt ("green card") number: _____
Type of Visa: _____

State of Residence: _____

## 2. Courses Requested - Enter all information for each course requested. Availability depends upon offering and space.

Semester/Term: Spring 2018

Have you ever applied to or attended the host institution? Yes ☐ No ☐ If so, when? _____

You may submit up to three (3) choices in priority order. You are limited to enroll in one course.

| Host Institution | Prefix & Course Number | Section | CRN | Day & Time | Credit Hours | Course Title |
|---|---|---|---|---|---|---|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| | | | | | | |

By signing this application form, I understand that information in my education record related to the cross-registration process will be shared between participating colleges. I understand that I need written approval from my academic advisor or mentor to be considered for enrollment. I understand that once registered, it is my responsibility to review the academic calendar at both institutions and make appropriate arrangements at the beginning of the semester to avoid missing academic requirements, such as final exams. Additionally, by signing this application, I consent to and request that the host institution send an official transcript to my home institution upon completion of the course.

Student's Signature: _____ Date: _____

## 3. Approvals

☐ I certify that the above-named student has the approval of the home institution listed above, is in good standing and meets enrollment eligibility guidelines.

For tuition purposes, the student's residency is currently classified as _____.

☐ The student has an MMR immunization on file or has provided it to the host institution.

_____
Cross-registration Coordinator/Registrar

Date: _____

_____
Advisor/Mentor

Date: _____

## 4. Dates to Remember

Nov. 22: Application due
Dec. 8: Notification on class