CROSS REGISTF	RATION FOR (Term, Qtr., Sem.):	Year:	_ 🗌 Sr.	. 🗌 Jr.	☐Soph.	Fresh.	Date:
		CROSS REGISTR	ATION	i			
accompanying lab	on is available to full-time undergra b with fees to be paid by the student n. A student may cross register in on nd an official transcript to the home in	t, if required) each term. Admission nly one institution each term. Prior	on is granted approval of	ed on a space	available b	oasis. Not all	courses are open to
I verify I have read	d all the terms associated with Cross	s Registration and agree to them.					
	n:		_			t Signature	
(Where the student is	is currently enrolled. This institution will acce	ept and evaluate the grade received from	n the HOST In	stitution and ass	sign credits a	according to its	ow n procedures.)
	n:		_ Have you	u previously a	uttended this	s institution?	? Yes No
(Where the student is	s visiting.)						
Last Name	First Name	Middle Name	Date of E	Date of Birth		Social Secu	urity Number (Optional)
Address:	Street	City	State	Zip		☐ Male	Female
Email Address		Cell Phone		Marital Status (Single, Ma			rated, Divorced, Widowed)
U.S. citizen 🗌	Yes No						
If no, country of	of citizenship		Visa	type	_		
The following information Ethnicity (Please	nation is voluntary: e check one to describe you):						
•	or Latino (a person of Cuban, Mexican, Pue nic or Latino	erto Rican, South or Central American, or	other Spanis	sh culture or ori	igin, regardl e	ess of race)	
American I Black or A Native Haw Asian (inclu	neck one or more of the following racia Indian or Alaskan Native (includes all O African American (includes people of Afri- waiian or other Pacific Islander (include udes people of the Far East, Southeast Asia ludes Europe and the Middle East)	Original Peoples of the Americas) rica and the Caribbean) des Original Peoples of Hawaii, Guam, or o	other Pacific	Islands)			
Registration Info	ormation:						
Course Name (F	-irst Choice)	HOST Subject/Course Code	Section I	Number	Credit H	lours	
Course Name (S	Second Choice or Co-Requisite)	HOST Subject/Course Code	Section I	Number	Credit H	lours	
For Office Use ON	NLY: Do not write in this space.						
HOME institution	n certifies student's good standing a	and eligibility to participate:			Dean or Re	egistrar's Sig	 jnature
HOME Institution	IE Institution Course Equivalent : Dept. Signature (if required):						
HOST verification	n of student's cross registration:				at		
		Course Number(s) and Total Cre	edit Hours			Institution	
1			Signatur	re HOST Colle	loge Regist	ration Office	