

CROSS-REGISTRATION FOR (Term, Qtr., Sem.): \_\_\_\_\_ Year: \_\_\_\_\_  Sr.  Jr.  Soph.  Fresh. Date: \_\_\_\_\_

### CROSS-REGISTRATION

Cross-registration is available to **full-time undergraduate** students in good academic standing. The student may take one undergraduate course (plus accompanying lab with fees to be paid by the student, if required) each term. Admission is granted on a space available basis. Selected courses are not open to cross-registration. A student may cross-register in only one institution each term. Prior approval of credit transfer is the student's responsibility. The host institution will send an official transcript to the home institution at the completion of the term.

I verify I have read all the terms associated with cross-registration and agree to them. \_\_\_\_\_

Student Signature

**HOME Institution:** \_\_\_\_\_

(Where the student matriculated. This institution will accept and evaluate the grade received from the HOST Institution and assign credits according to its own procedures.)

**HOST Institution:** \_\_\_\_\_ Have you previously attended this institution?  Yes  No

(Where the student is transient.)

\_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Date of Birth                      CWRU ID #

\_\_\_\_\_  
Address:                      Street                      City                      State                      Zip                       Male                       Female

\_\_\_\_\_  
Email Address                      Cell Phone                      Marital Status (Single, Married, Separated, Divorced, Widowed)

**Ethnicity** (Please check one to describe you):

\_\_\_\_\_ Hispanic or Latino (a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, **regardless of race**)  
\_\_\_\_\_ Not Hispanic or Latino

**Race** (Please check one or more of the following racial categories to describe you):

\_\_\_\_\_ American Indian or Alaskan Native (includes all Original Peoples of the Americas)  
\_\_\_\_\_ Black or African American (includes people of Africa and the Caribbean)  
\_\_\_\_\_ Native Hawaiian or other Pacific Islander (includes Original Peoples of Hawaii, Guam, or other Pacific Islands)  
\_\_\_\_\_ Asian (includes people of the Far East, Southeast Asia, or Indian subcontinent)  
\_\_\_\_\_ White (includes Europe and the Middle East)

**U.S. citizen**  Yes  No

If no, country of citizenship \_\_\_\_\_ Visa type \_\_\_\_\_

**Registration Information:**

\_\_\_\_\_  
Course Name (First Choice)                      HOST Subject/Course Code                      Section Number                      Credit Hours

\_\_\_\_\_  
Course Name (Second Choice or Co-Requisite)                      HOST Subject/Course Code                      Section Number                      Credit Hours

For Office Use ONLY: Do not write in this space.	
HOME institution certifies student's <b>good standing</b> and <b>eligibility to participate</b> : _____	Academic Dean or Registrar's Signature
HOME Institution Course Equivalent: _____	Dept. Signature (if required): _____
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HOST verification of student's cross-registration: _____	at _____
Course Number(s) and Total Credit Hours	Institution
_____ Signature, HOST College Registration Office	