

## CROSS-REGISTRATION FORM

This form must be submitted to the host school Registrar during their add/drop period.  
Please read through all relevant guidelines, procedures, and instructions prior to completing this form.

**Date:** MM / DD / YYYY

**Term:** (check one on each of the following two lines)

- Fall  Winter  Spring  
 Semester  Trimester

**Year:** YYYY

**Have you cross-registered before?**  Yes  No

### STUDENT INFORMATION

**Social Security Number:** ###-##-####

**Date of Birth:** MM/DD/YYYY

**Gender:**  Male  Female

**Last Name:** [Click here to enter text.](#)

**First Name:** [Click here to enter text.](#)

**Middle Name:** [Click here to enter text.](#)

**Email Address:** [Click here to enter text.](#)

**Permanent Address (Out of Term Address):**

**Street:** [Click here to enter text.](#)

**City, State, Zip:** [Click here to enter text.](#)

**Telephone:** (###) ###-####

**School Address (In Term Address):**

*(if different from above)*

**Street:** [Click here to enter text.](#)

**City, State, Zip:** [Click here to enter text.](#)

**Telephone:** (###) ###-#### **Mobile?**

**Are you a U.S. Citizen?**  Yes  No **If no, then:**

**Country of Citizenship:** [Click here to enter text.](#)

**Visa Type:**  F-1  J-1  Other: \_\_\_\_\_

**Visa Expiration Date:** MM/DD/YYYY

**Home School Attending (check one):**

- Colgate University  Hamilton College  
 Hobart and William Smith Colleges  
 St. Lawrence University  
 Skidmore College  Union College

**Year/Class** (during term of study you are applying):

- 1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  4<sup>th</sup>  Other

**Major:** [Click here to enter text.](#)

**Total Credit Hours Enrolled for at Home**

**School:** [Click here to enter text.](#)

**Expected Graduation Date:** MM/YYYY

### REGISTRATION INFORMATION

Students may take a maximum of one course per term; petitions for additional courses may be considered by home school.

#### First Course Request

**Name of Host School:** [Click here to enter text.](#)

**Course Dept.:** [Click here to enter text.](#)

**Course No.:** ### **Credit Hrs.:** ##

**Course Title:** [Click here to enter text.](#)

**Required Signatures (in the following order):**

By signing you are confirming that the above student is in good academic standing and is expected to be a full-time student for the term in question, if required by your home school.

- |                        |       |
|------------------------|-------|
| 1. _____               | _____ |
| HOME Chair or Advisor  | Date  |
| 2. _____               | _____ |
| HOME Registrar or Dean | Date  |
| 3. _____               | _____ |
| HOST School Registrar  | Date  |

#### Second Course Request

**Name of Host School:** [Click here to enter text.](#)

**Course Dept.:** [Click here to enter text.](#)

**Course No.:** ### **Credit Hrs.:** ##

**Course Title:** [Click here to enter text.](#)

**Required Signatures (in the following order):**

By signing you are confirming that the above student is in good academic standing and is expected to be a full-time student for the term in question.

- |                        |       |
|------------------------|-------|
| 1. _____               | _____ |
| HOME Chair or Advisor  | Date  |
| 2. _____               | _____ |
| HOME Registrar or Dean | Date  |
| 3. _____               | _____ |
| HOST School Registrar  | Date  |

#### Student Signature/Transcript Request

I have read the New York Six cross-registration guidelines. Upon completion of the above course(s), I request that an official transcript be forwarded to my home school.

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Distribution** - Four copies should be made of this form and distributed as follows: Registrar Host School, Registrar Home School, Bursars Host School, and Student. Additional copies may be needed as required by Dean, Chair or Advisor. Contact information can be found online at the following URL: <http://www.newyork6.org/content/new-york-six-cross-registration-initiative>