

# HUDSON - MOHAWK

CROSS-REGISTRATION AGREEMENT



**PLEASE PRINT LEGIBLY**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

\*Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Student ID#: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

*\*Personal student information is treated confidentially and consistent with the Family Educational Rights and Privacy Act (FERPA), the NYS Cyber Security Policy P03-002: Information Security Policy, and is compliant with NYS General Business Law Section 399-ddd.*

E-mail Address: \_\_\_\_\_

|                          |              |            |              |
|--------------------------|--------------|------------|--------------|
| Permanent Address: _____ |              |            |              |
| City: _____              | State: _____ | Zip: _____ | Phone: _____ |
| Local Address: _____     |              |            |              |
| City: _____              | State: _____ | Zip: _____ | Phone: _____ |

Have you ever been dismissed/suspended from a college for disciplinary reasons? Yes \_\_\_ No \_\_\_

Name of Home Institution: \_\_\_\_\_

Name of Host Institution: \_\_\_\_\_

Cross-Registration Semester/Term: Fall: \_\_\_ Spring: \_\_\_ Winter \_\_\_ (Not available at all institutions) Year: 20 \_\_\_

| Host Institution Course# and Section# | Host Institution Course Title | Host Institution Credit Hours | Home Institution Course Equivalency – to be completed by the home institution. | Credit Hours at Home Institution |
|---------------------------------------|-------------------------------|-------------------------------|--|----------------------------------|
|                                       |                               |                               |  |                                  |
|                                       |                               |                               |  |                                  |
|                                       |                               |                               |  |                                  |

**Signatures below are REQUIRED**

I have read and understood the terms and conditions of this cross-registration agreement (on the reverse side). By signing I give permission for the Home and Host institutions to exchange enrollment, grade, and financial information. I understand that my current registration is for non-degree study and that my enrollment in this course/these courses does not guarantee my admission as a degree seeking student. In order to matriculate, I must file a formal application with the appropriate admissions office and meet admissions requirements. I am also aware that enrollment changes may impact my eligibility for financial aid for the current term and/or future terms. I will consult my Financial Aid Office regarding academic eligibility for financial aid, including satisfactory academic progress standards. I certify to the best of my knowledge that the information above is correct and true.

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

**Advisor or Chair or Dean Signature (discretion of home campus):** \_\_\_\_\_

The above student is in good academic standing and is expected to have a course load equivalent to full time status between the Home and the Host institution. I recommend approval of this request based on the course equivalents and credit hours above.

**Home Institution Registrar's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Host Institution Registrar's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

|  |                               |                               |
|--|-------------------------------|-------------------------------|
|  | Denied: _____                 | Reason: _____                 |
|  | Initials: _____               | Initials: _____               |
|  | Date: _____                   | Date: _____                   |
|  | HOME ID: _____                | HOST ID: _____                |
|  | Processed By Home Institution | Processed By Host Institution |