Hartford Consortium for Higher Education
Cross-Registration Program
Registration Form

Full Members: Saint Joseph College / Trinity College / University of Hartford
Special Program: Capital Community College / Central Connecticut State University / Goodwin College / Hartford Seminary / University of Connecticut
Associate Member: Saint Thomas Seminary

Instructions: Please fill out a separate application for each course requested. Use ball point pen, being sure all copies are legible. After the form has been endorsed at your home college, submit it to the Registrar’s Office at the college you wish to attend. If enrollment is approved, the Registrar’s Office will sign the application and return one copy to you. You must adhere to the procedures and deadlines of the host institution.

To make any changes, including withdrawal, go to the Registrar’s Office at your home college and tell the Registrar at your host college also. To add or substitute a course you must make out a new application and proceed as before.

Name ____________________________ Social Security # __________

Last First Middle

College Address __________________________________________

Date of birth ____________________________ Phone # __________

I am a full-time undergraduate in my __________ year at: SJC TC UH CCC CCSU GC HS UCONN STS

I request permission to enroll in the ______ FALL ______ SPRING 20 ______ at ____________________________

name of host college

COURSE REQUESTED

<table>
<thead>
<tr>
<th>code</th>
<th>number</th>
<th>section</th>
<th>day &amp; time</th>
<th>course title</th>
<th>credit hours (office use only)</th>
</tr>
</thead>
</table>

auth. Signature and final grade

Signed ____________________________ Date __________

Home Address ____________________________

I (we) certify that the applicant has correctly described his/her full-time undergraduate status at this institution and that his/her request is approved.

Signed ____________________________ Date __________

ADVISOR AT HOME COLLEGE (if required)

Signed ____________________________ Date __________

HOME COLLEGE REGISTRATION OFFICER

Enrollment approved.

Signed ____________________________ Date __________

FACULTY MEMBER (if required)

Signed ____________________________ Date __________

HOST COLLEGE REGISTRATION OFFICER

Students are responsible for paying lab or special fees as indicated in the course listing.

STUDENT COPY - WHITE  HOME COLLEGE COPY - YELLOW  GRADE SHEET - PINK  HOST COLLEGE COPY - GOLDENROD