



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.*

Permanent Address: _____ **County:** _____
City: _____ **State:** _____ **Zip:** _____ **Phone:** _____

Local Address: _____ **County:** _____
City: _____ **State:** _____ **Zip:** _____ **Phone:** _____

E-mail Address: _____

Have you ever been convicted of a felony? Yes ___ No ___
 Have you ever been dismissed/suspended from a college for disciplinary reasons? Yes ___ No ___

Cross-Registration Semester: Fall: ___ Spring: ___ Year: 20___
 Have you previously cross-registered at the host institution? Yes ___ No ___

Name of SUNY Home Institution: _____
 Name of SUNY Host Institution: ___SUNY FREDONIA_____

SUNY Fredonia			SUNY Home Institution	
Course# and Section#	Course Title	Credit Hours	Course Equivalency	Credit Hours

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 SUNY Fredonia to share course information with the Home institution. 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.

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 be a full-time student for the term in question. I recommend approval of this request based on the course equivalents and credit hours above.

Home Institution Signature: _____ Title: _____ Date: _____

Fredonia Registrar's Office Signature: _____ Title: _____ Date: _____

HOME ID: _____ HOST ID: _____
 Date: _____ Date: _____
 Initials: _____ Initials: _____
 Denied: _____ Reason: _____