

Cross Registration Request Form



Guidelines:

1. Enrollment is limited to one class per semester/term.
2. Any full-time student enrolled at a Pittsburgh Council on Higher Education (PCHE) school may cross register.
3. Cross registration must be approved by the home advisor, home dean, home registrar, and host registrar.
4. Cross registration does not apply to summer semesters/terms

For the complete set of PCHE cross registration requirements, contact your home registrar.

Section 1: General Information

Student ID: _____ SSN: _____ Birth Date (mm/dd/yy): _____ Gender: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____
 _____ Street Address _____ Apt/Box _____
 _____ City _____ State _____ ZipCode _____

Telephone: _____ E-mail Address: _____
 Home School.edu _____

Status: Semester/Term: Year: _____

Home School: Carlow Chatham Point Park
 Carnegie Mellon Duquesne Robert Morris
 Community College of Allegheny County La Roche University of Pittsburgh
 _____ (campus) Pittsburgh Theological Seminary ROTC
 _____ (school)

Are you in a joint program? If yes, name (i.e Comp Bio CMU/Pitt Law): _____

Section 2: Cross Registration Information

Host School: Carlow Chatham Point Park
 Carnegie Mellon Duquesne Robert Morris
 Community College of Allegheny County La Roche University of Pittsburgh
 _____ (campus) Pittsburgh Theological Seminary ROTC
 _____ (school)

Have you previously attended Host School?

Cross Registration Course Request

Primary Choice

| | Offering Department | Course Title | Course Ref./ Section No. | Credits/ Units | Grading Option | Meeting Days | Time From | Time To | Bldg./ Room |
|----------|---------------------|--------------|--------------------------|----------------|----------------|--------------|-----------|---------|-------------|
| A | | | | | | | | | |
| Lab/Rec. | | | | | | | | | |

Secondary Choice (in case primary choice is not available)

| | | | | | | | | | |
|----------|--|--|--|--|--|--|--|--|--|
| B | | | | | | | | | |
| Lab/Rec. | | | | | | | | | |

Section 3: Signatures

Student: _____ Date: _____

Home Advisor Approval: _____ Date: _____

Home Dean Approval (Univ of Pitt Only): _____ Date: _____

Home Registrar Approval: _____ Date: _____

Host Registrar Approval: _____ Date: _____

| | Approved | Special Permission Required | Not Available |
|----------|----------|-----------------------------|---------------|
| A | | | |
| Lab/Rec. | | | |
| B | | | |
| Lab/Rec. | | | |

Remarks: _____