Georgia Institute of Technology

APPLICATION FOR CROSS-REGISTRATION
GEORGIA TECH REGIONAL ENGINEERING PROGRAM

INSTITUTIONAL INFORMATION

Enrolling Institution: ❑ GIT ❑ AASU ❑ GSoU ❑ SSU

Cross-Registration Institution: ❑ GIT ❑ AASU ❑ GSoU ❑ SSU Term Requested: _____

Have you ever applied to and/or attended the cross-registration institution? ❑ Y ❑ N If so, when? _____

PERSONAL

Eagle ID# or
Social Security Number: _____ GTID#: _____ Gender: M F

Birthdate (MM-DD-YY): _____ Place of Birth: _____

Full Legal Name (Last, First, Middle): _____

Mailing Address

Street: _____

City: _____ State: _____ ZIP: _____ County: _____

Telephone Number: _____ Alternate Telephone Number: _____

E-Mail Address: _____

Class Level: F So J Sn Major: _____ Degree: _____ Est. Date of Graduation: _____

ETHNICITY AND RACE

❑ American Indian or Alaska Native ❑ Black or African-American ❑ Native Hawaiian/Other Pac. Islander ❑ Other
❑ Asian ❑ Hispanic or Latino/Latina ❑ White

CITIZENSHIP STATUS

❑ U.S. Citizen ❑ Alien, Non-immigrant ❑ Alien, Permanent Resident

If you are not a U.S. citizen, of which country are you now a citizen? _____

Alien Registration Number: _____ Type of Visa: _____

COURSES REQUESTED

Enter all information for each course. Incomplete forms will be returned.

Dept. Prefix & Course #	Section	CRN	Day and Time	Credit Hrs.	Course Title

❑ I have satisfied the prerequisite(s) for this course. ❑ I am currently enrolled in the prerequisite course(s).

Dept. Prefix & Course #	Section	CRN	Day and Time	Credit Hrs.	Course Title

❑ I have satisfied the prerequisite(s) for this course. ❑ I am currently enrolled in the prerequisite course(s).

Dept. Prefix & Course #	Section	CRN	Day and Time	Credit Hrs.	Course Title

❑ I have satisfied the prerequisite(s) for this course. ❑ I am currently enrolled in the prerequisite course(s).

INSTITUTIONAL APPROVAL

I/we certify that the above named student has the approval of the enrolling institution listed above, and is currently enrolled and in good standing. The courses requested, if successfully completed ❑ will / ❑ will not be applicable to the student's degree program.

ENROLLING INSTITUTION

Cross-Registration Coordinator: _____ Date: _____

CROSS-REGISTRATION INSTITUTION

Cross-Registration Coordinator: _____ Date: _____

DATE RECEIVED: _____ DATE PROCESSED: _____

ELIGIBILITY

1. Students will be limited to a total of ten semester hours of cross-registration credit prior to their admission to Georgia Tech.
2. At the time of the cross-registration, the student must be enrolled and in good academic standing in a GTREP institution.
3. During the term of cross-registration, the student must be registered for 3 or more credit hours at their enrolling institution.

PREREQUISITES

1. It is the responsibility of the student applying for cross-registration to be aware of any course prerequisites.
2. If a student needs assistance in determining whether or not they have satisfied a prerequisite, the student should contact the GTREP coordinator at their enrolling institution. Transcripts must be submitted to the cross-registration institution to certify prerequisites before the student will be admitted into the course.

DEADLINES AND SCHEDULES

1. Cross-registration deadlines are listed on the GTREP Web site at: *www.gtsav.gatech.edu/students/calendar.html*
2. Applications for cross-registration will not be accepted after the posted deadline. It is recommended that students verify their cross-registration status with their GTREP coordinator or cross-registration coordinator prior to the deadline.
3. It is the responsibility of the student to be aware of deadlines at both the enrolling and cross-registration institution and to cross-register as early as possible. GTREP will not place students in classes that are closed/full/restricted.
4. Cross-registration classes follow the academic calendar of the institution providing the class. This may include start/end dates, holiday schedules and final exams. It is the responsibility of the cross-registered student to be aware of these dates.

DROP/ADD

1. Additional courses may be added prior to the registration deadline (up to ten total credit hours). The student should complete a cross-registration ADD form for any added course(s).
2. Students wishing to drop a cross-registered course must complete a DROP form by the posted deadline. This form should follow the same routing (see below) as the cross-registration form. Students must be withdrawn at each institution to avoid the assignment of a grade other than "W" at the end of the term.

ADDITIONAL INFORMATION

For the latest information about cross-registration within GTREP, please refer to: *www.gtsav.gatech.edu/gtrep/cross-reg.html*

ROUTING

1. The routing of the cross-registration form should follow the order of signatures below.
2. It is the responsibility of the student to ensure that the form is routed through both approval levels at the enrolling institution. The cross-registration coordinator at the enrolling institution will then forward the form to the coordinator at the cross-registration institution.
3. The names of the various coordinators at the GTREP institutions are as follows:

   ARMSTRONG ATLANTIC STATE UNIVERSITY
   Cross-Registration Coordinator: Thomas Murphy

   GEORGIA SOUTHERN UNIVERSITY
   Cross-Registration Coordinator: Gerald Jones

   SAVANNAH STATE UNIVERSITY
   Cross-Registration Coordinator: Pravin Raut

STUDENT SIGNATURE

I certify that the information furnished by me is true. I agree to abide by all rules, regulations, practices and policies of the cross-registration institution while enrolled there.

❑ I request submission of my transcript to the cross-registration institution for purposes of verifying the satisfaction of course prerequisities.

Student's Signature: _____ Date: _____