CROSS-REGISTRATION PERMIT

If you are a financial aid recipient, you must be enrolled in 12 units at your home institution.

Home Ins	stitution:		Semester or Quarter:			
Student N	Name:				SS#:	
	Last	First		Middle		
Local Ad	dress: Street		Apt.#		Telephone#:	
	Sireet		Арт.#			
					Date of Birth:_	
	City	;	State	Zip Code	9	
Number	of units currently	registered at Home In	stitution:	Prog	ıram: Grad_	Undergrad
HOST IN	ISTITUTION:					
Course	to be Taken:					
Course # Title		Title	Units			
Signature	e of Instructor:					
Any ch	nange in regis	tration as showr	n above i	must be a	approved by bo	th colleges.
A. S	Student must mee	et all prerequisites &	criteria for	cross regist	tration listed in the C	CA handbook:
A. Student must meet all prerequisites & criteria for cross registration listed in the CCA handbook: <u>https://www.cca.edu/students/handbook/registration</u>						
B. Student is responsible for obtaining all appropriate signatures and returning						
the Student Records Office (Registrar					copy of the permit n	nust be submitted
at the home college one week after the class C. Student is responsible for meeting all registrat					deadlines and ner	alties at the host
institution.					, deadiiries, and per	iailles at the nost
D. If this class is dropped, it is the student's responsibility to notify both the host and home colle						
	COM	PLETE BY SECURIN	NG SIGNA	TURES IN	NUMERICAL ORDI	<u> </u>
	HOM	IE INSTITUTION		ŀ	HOST INSTITUTION	I
1 Facu	Ilty Advisor	Date			3. Registrar	Date
Faculty Advisor		Date			3. Registiai	Date
2. Registrar		Date				
1a. GT	TU Students Only			2a. Holy Names College Students:		
Student	Signature				Date	
Student Signature				Date		