

HCHE **GRADUATE** CROSS REGISTRATION FORM

General: Students should review ALL course offerings, guidelines and registration requirements on the HCHE website. Graduate students may enroll in up to 3 courses per academic year (Fall, Spring and Summer terms) - *See University of Hartford Fall 2019 update* - at another participating HCHE member institution. **Eligibility:** Check with the *home and host* institution registrar's office to confirm course eligibility. Full-time students enrolled at all other HCHE member institutions may enroll in selected courses at *host* institutions. **Trinity College and Goodwin College** permit its part-time students to cross register. Check course selections online or at the registrar's office of your *home* college/university. All fees such as labs, books etc. are the responsibility of the student and are to be paid to the *host* institution. Check with your *home* institution concerning financial aid eligibility requirements. **Instructions:** Complete all sections of the form. Use a **separate form for each course requested**. 1. Submit the form(s) to the registrar's office of your *home* college/university. 2. Upon approval by the home institution, submit the *signed* form to the registrar's office at the *host* college/university for approval. 3. Upon approval, a copy will be returned to you. 4. It is important that you keep a signed copy for your records. **NOTE:** you must adhere to deadlines of the *host* college/university in order to enroll and/or withdraw from any course.

*If you withdraw from a course, you are responsible for notifying **both host and home** institution.

Last Name	First Name	Middle	Student ID#
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Home Mailing Address (Primary) – include Street, PO Box, City, State, Zip Code

Primary Phone/Cell	Date of Birth
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I certify that I am a Full-time Part-time graduate student at _____
Institution Degree Field

Host college/university/Seminary requested:

- | | | |
|--|--|---|
| <input type="checkbox"/> Capital Community College | <input type="checkbox"/> Central CT State University | <input type="checkbox"/> Manchester Community College |
| <input type="checkbox"/> Goodwin College | <input type="checkbox"/> Hartford Seminary | <input type="checkbox"/> University of Saint Joseph |
| <input type="checkbox"/> St. Thomas Seminary | <input type="checkbox"/> Trinity College | |
| <input type="checkbox"/> UCONN (Hartford) | <input type="checkbox"/> University of Hartford | |

Enrollment for Fall 20__ Spring 20__ Summer 1 Summer 2 20__

COURSE REQUESTED (only **ONE** course request per form)

PREFIX	NUMBER	SECT.	DAYS/TIMES	COURSE TITLE	CREDIT HRS

Student Signature	Date
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Advisor Signature/ <i>Home</i> Institution	Date
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Home Institution Registration Officer Signature	Date
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Host Institution Registration Officer Signature	Date
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Course Faculty Signature/ <i>Host</i> Institution	Date
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MUST BE COMPLETED BY HOST INSTITUTION REGISTRAR'S OFFICE:

Host Institution Student ID # (permanently assigned): _____ **Student email:** _____

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