

FALL 2023 CROSTOWN STUDENT REGISTRATION FORM

RHODES COLLEGE
CHRISTIAN BROTHERS UNIVERSITY
UNIVERSITY OF MEMPHIS

Semester and Year Home Institution ID # Crosstown Institution ID #

Home Institution: D_

Home Institution Registrar Use Only:

Table with 6 columns: Dept, Course#, Section, Course Section Title, Credit, Course Equivalency/Credit. Includes a large empty box for notes.

Home Institution Approvals (signature/date):
Advisor
Registrar

Crosstown Institution Approvals (signature/date):
Instructor
Registrar

I have read and understand the policies regarding the Crosstown Enrollment Program and agree to abide by them. I agree to abide by the academic and social policies and procedures of the Crosstown institution in which I will be enrolled. I understand that failure to do so may lead to involuntary withdrawal from the Crosstown course and other possible consequences at my home institution.

Student Signature Date

*****Copies of this form MUST be submitted to the Registrar's Office*****

*****at both institutions in order to be registered for the semester*****

CROSTOWN STUDENT REGISTRATION INFORMATION

institution in order for grades to be issued. The appropriate registration form must be completed fully in