

## JPII and CUA Cross Registration Form

	Write in this colu		n 🗸
STUDENT NAME			
Home School			
Course Inf	ormation		
COURSE TITLE			
Course Number & Section [Include Letter Prefix]	ion		
Course Level [MA, MT	S, STL, STD, Ph.D.]		
Course Instructor			
Semester & Year of Cou	ırse		
Registering or Withdrav	wing		
Audit or Credit?			
Course Credit Hours			
Application Date			
Student Info	rmation		
Student Number [ID card] (Prefix "CUA" to number if a CUA student)			
Social Security Number	ſ		
Street-Apt. Address			
City, State, Zip			
Home Phone			
Cell Phone			
Email Address			
Are you graduating this	term?		
FINAL GRADE		Student, do not write in this space.	
Academic Advisor (School Where Student I		s Registered)	Date
Area Director	(If Student is enrolled in STRS-CUA		Date
Academic Advisor	(School Where Courses Offered)		——————————————————————————————————————

## Form instructions:

- Complete form and obtain signatures from your school. Then make two copies, one for your school and one for you.
  Give one copy to the administrator of your own school for record keeping.
  CUA students leave form with TRS administrator for processing. JPII students hand deliver signed form to TRS administrator in Caldwell 106.