



**WESTERN NEW YORK CONSORTIUM  
UNDERGRADUATE CROSS REGISTRATION REQUEST FORM  
(For Full-Time Matriculated Students Only)**

**IMPORTANT INFORMATION FOR STUDENTS - PLEASE READ CAREFULLY**

Medaille College belongs to the Western New York Consortium of Higher Education, which permits full-time students to register for individual courses in any of the participant colleges or universities.

**Requirements:**

- Student must be Full time (at least 12 but no more than 18 credits) matriculated status during the semester in which cross registration occurs
- Student eligibility for cross registration is discontinued if student status falls below full time during cross registration semester (Medaille College will notify the host institution and appropriate action will be determined (i.e., tuition liability for cross registered courses or canceled enrollment)

**Restrictions:**

- Students may cross register for only one course per semester
- Students may cross register for UNDERGRADUATE courses only
- Students may cross register for fall and/or spring semesters only
- Students may **NOT** cross register for Independent Study at hosting institution
- Students may **NOT** cross register for courses already taken and failed at Medaille College

**It is the responsibility of the student:**

- To find courses at the participating institution that fulfill requirements of his/her degree program at Medaille. Student must bring course description to Registrar's Office before he/she will be allowed to cross register
- To acquire written approval from advisor and department chairperson
- To abide by the rules and regulations outlined at the institution where he/she is registered

**I have read and agree to abide by the above regulations for cross registration.**

Student's Signature \_\_\_\_\_

Date \_\_\_\_\_

Student's Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Student's Phone #: \_\_\_\_\_ Student's Address: \_\_\_\_\_

Cross Registration Semester: \_\_\_\_\_

Medaille College Full Time Student Requests to Cross Register at: \_\_\_\_\_

Name of Visiting Institution

Student Term at Medaille: \_\_\_\_\_ Student Registered Credit Hours at Medaille: \_\_\_\_\_

Course Requested (Maximum of **ONE** course) which is not regularly offered at Medaille:

Dept. & Course Number	Course Title	Semester	Hours	Credit

**Required Medaille Signatures:**

Signature of Advisor or Department Chair \_\_\_\_\_

Signature of Cross Registration Office (Medaille's Registrar's Office) \_\_\_\_\_

Signature of Visiting Institution Cross Registration Officer \_\_\_\_\_

Date \_\_\_\_\_