

Application for Cross Enrollment

California State University or University of California

Complete form and submit to Admissions and Records at Chaffey College prior to host campus filing period. You must verify admission and filing deadlines with the host campus. After Chaffey College completes certifications, seek instructor approval at host campus during filing period designated by host campus. Host campus will provide registration instructions.

Home Campus: Chaffey College Host Campus: _____ (University)

Planned semester/quarter/term of cross enrollment: _____ Term: _____ Year: _____

If you have previously attended the host campus, what was last term attended? Term: _____ Year: _____

Name _____ Social Security No. _____
Last First Middle

Birth Date _____ / _____ / _____ E-mail Address: _____

Mailing Address:

_____ Street _____ City _____ State _____ Zip Code _____

Home telephone (____) _____ Area Code Number Message telephone (____) _____ Area Code Number

Reason for taking course:

Course unavailable at home institution _____ General interest in subject _____

Completing transfer _____ Other _____

I certify the information provided is accurate and that I have read and understand eligibility requirements, enrollment conditions, and procedures as stated.

Date _____ Signature _____

CHAFFEY COLLEGE CERTIFICATION

Chaffey College certifies that this student meets cross enrollment eligibility requirements.

Signature: _____
Name/Title Date

HOST CAMPUS CERTIFICATIONS

Approval of class instructor:

Course Planned at Host Campus	Units Q	Units S	Instructor Approval

Processing fee received _____ Ethnicity _____ Gender _____

Cross Enrollment approved _____ Date _____ Signature _____