INTER-INSTITUTIONAL APPROVAL FORM

(FOR STUDENTS TAKING COURSES ON ANOTHER CAMPUS)

Home Institution:		Visited Institution			
□ Duke University	□ UNC – Chapel Hill	□ Duke University □ UNC - Chapel Hill			
☐ NC Central University	□ UNC – Charlotte	□ NC Central University □ UNC - Charlotte			
□ NC State University	□ UNC – Greensboro	☐ NC State University ☐ UNC – Greensboro			
Classification:					
Graduate / Professional	☐ Undergraduate	Department / Co	ollege:		
Last name	First name	Middle name or initial	Student ID n	umber (Social Security number)	
CURRENT LOCAL ADDRESS	(please print clearly)				
Street address, RFD or PO Box number		Apartment	Apartment Telephone		
City	Stat	e Zip	Email address		
PERMANENT MAILING ADDR	tESS (where you will be receiving registra	ation materials)			
Street address, RFD or PO Box nu	imber City	State Zip	County	Country (if not US resident)	
What is your legal residence?	County	State	Country		
SEX: Male Female		OF BIRTH:			
				of Health Education and Welfare to assure	
compliance with the Civil Rights A	ct. Ethnic origin is not a factor in admissi spanic origin) American Ind	on; all applications are	considered with	nout reference to sex, creed, or race. sian or Pacific Islander	
Have you ever attended the visi	ted institution: No Yes	If "Yes," last term a	attended		
Term you desire to attend: Fall	Year Spring Summer I	Summer II	Are you	graduating this term? Yes No	
Number of hours for which you	vill be enrolled for the above semester	: Home institution	Visited	institution	
COURSE(S) TO BE TAKEN ON	VISITED CAMPUS (please consult th on a pass/fail or no-credit basis.				
	Tu.	0-11-		Visited Inst. Approval (if required)	
Subject Abbr. Course No. Section	n Title	Cr. Hrs	s. Hour / Da	ys or attach documentation	
	Manager and the state of the st				
I hereby give consent for my "home institu- tution" registrar's office my student ide		Departmental / Advisor's approval Date			
record keeping purposes, Also, I am awar submitted to my "home institution". Regis		Dapatellolla i Aution o approva			
above.			College dean's approval		
Dut.		Home institution regi	Home institution registrar's approval Date		
Student's signature	Date			Visited Institution Use Only	
White: Registration Office - Home Institution Use Only			Canary: Registration Office - Visited Institution Use Only		
Sent completed inter-institutional form to visited institution by:			Visiting student registered on		
US Mail / State courier		_ Visiting student n	ot registered b	ecause	
Student dropped course -					
visited institution notified on		Sent confirmation / rejection notice by: US Mail Email Student Date			
		Received drop no			