## State System of Higher Education Course Sharing Form for Current PASSHE Students



Part I: To be filled out by student applying to take a course at another PASSHE university.

Are you enrolled at your home campus d	uring the course share semeste	er? Yes	No				
First Name:	Middle:		e:				
University/Local Address:							
E-mail Address:							
Legal/Permanent Address		_					
Legal PA Resident?Yes/County Student's Home University:	No	Stu	ıdent ID N	lumber			
Name of university you wish to take	the course:						
Academic Term: Fall / Spring	/Summer Year:						
Student's Signature:	List	course(s) below y	ou intend t	o enroll ir	through PAS	SSHE	
course sharing. When complete, email the	his form to your Advisor or De	epartment Chair	person.				
Home University Course Equivalency		Teaching University Course Information  Course name, number (FNG101) Number of Credits Registrars: Is course on Approved List?					
Course name and number (ENG101)	Course name, number (ENG101)	Number of Credits	Registrars:	is course o	If No, CAO appr		
			Yes	No	Yes	No	
			Yes	No	Yes	No	
			Yes	No	Yes	No	
Please provide the reason for each cou	urse you would like to take at	a different univ	ersity:				
Advisor or Department Chair Acknowledgment				Date			
Dean - Institutional S		Date					
Dout III. The information listed in Dout	lio accurate and bac been	ravifiad by the a	tudontio h		voroitv		
Part II: The information listed in Part and the student has been registered		-		ionie uni	versity		
Registrars: Confirm approvals above	Home University Registrar Signatur	70			Date		
Down III. The student has been veristed	, , ,				Date		
Part III: The student has been registered	eu for the course at the teach	ing university.					
Scheduled					5.		
Teaching University Registrar Signature					Date		

<u>Teaching University Registrar</u>: Email a copy of this form to Home University Registrar and student, and notify appropriate staff to provide access to necessary information systems (Email, SIS, D2L)

Student acknowledgment: My signature acknowledges that I have spoken with my advisor or department chair and have determined how this course fulfills my requirements; understand that if the course is not approved for sharing, I will be billed for this course by the teaching institution; and authorize the release of my transcript by the teaching university to my home university. I understand that the grades will be accepted in full by my home university, be applicable towards my declared program, and will be included in my home university credits, GPA, and residency.