



# Bowling Green State University — The University of Toledo

## CONCURRENT ENROLLMENT



PLEASE PRINT

Name: Last, First, Middle		Maiden (If applicable)	SSN/ID#
Mailing Address: No. Street		Birth Date: (month/day/year)	
City, State, ZIP		Home Phone (area code/number)	Residency Ohio <input type="checkbox"/> Monroe Co. <input type="checkbox"/> Other <input type="checkbox"/> County/State
Home Institution <input type="checkbox"/> BGSU <input type="checkbox"/> UT	Current Academic Standing at Home Institution <input type="checkbox"/> Good Standing <input type="checkbox"/> Not in Good Standing		Have You Attended the Host Institution Before? Yes <input type="checkbox"/> Date _____ No <input type="checkbox"/>
Enrollment Requested for: Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> 20____		Student Signature _____ Date: _____	

### SCHEDULE OF COURSES AT HOST UNIVERSITY

Call Number	Department/Subject	Course Number	Section	Credit Hours	S/U Grade	Audit

Registrar's Signature: \_\_\_\_\_

### SCHEDULE OF COURSES AT HOME UNIVERSITY

Call Number	Department/Subject	Course Number	Section	Credit Hours	S/U Grade	Audit

Registrar's Signature: \_\_\_\_\_

Credit Hrs Enrolled at:	Total Cr Hrs:	<input type="checkbox"/> Full Time	Fees Paid at:	Student Rank:
BGSU _____	_____	<input type="checkbox"/> Part Time	BGSU _____	<input type="checkbox"/> Freshman <input type="checkbox"/> Junior <input type="checkbox"/> Other
UT _____	_____		UT _____	<input type="checkbox"/> Sophomore <input type="checkbox"/> Senior
<b>Courses Approved for Credit Towards a Degree</b>				
College Dean/Adviser Approval: _____			Date: _____	