



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 _____		Rocket Email Address _____ Birth Date: (month/day/year) _____
City, State, ZIP _____ Home Phone (area code/number) _____		Residency _____ County/State _____ Ohio <input type="checkbox"/> Monroe Co. <input type="checkbox"/> Other <input type="checkbox"/>
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 <input type="checkbox"/> Part Time	Fees Paid at:	Student Rank:
BGSU _____	_____		BGSU _____	<input type="checkbox"/> Freshman <input type="checkbox"/> Junior <input type="checkbox"/> Other
UT _____	_____		UT _____	<input type="checkbox"/> Sophomore <input type="checkbox"/> Senior
Courses Approved for Credit Towards a Degree				
College Dean/Advisor (Please print) _____		Signature _____		Date _____