

Mills College – Academic Records
Summer 2017 Cross Registration Form



Due May 19, 2017

1. This form is required for students from OTHER institutions who wish to take a course at Mills College for Summer 2017.
2. Submit this form no later than **May 19, 2017**.

SECTION I

Mills ID: _____ Semester/Year: Summer 2017

Name: _____
Last First M.I.

Address: _____

Phone Number: _____ Email Address: _____

Home Institution: _____ Birthdate: _____

Emergency Contact Person: _____ Phone: _____

SECTION II

Please indicate the course to be taken:

CRN	Subject (Ex. ENG)	Course Number	Section	Title	Instructor Signature

* In lieu of a signature, the instructor may email you a statement approving you to add the course. Please submit both this form and a print out of the email upon submission. Instructor contact information is available through the Mills homepage, in the **Academics** drop down menu, through the **Faculty** link.

SECTION III

Please read the following and sign below:

I understand that I am bound by the enrollment deadlines of both Mills College and my home institution, and that confirming the course work will be accepted by my home institution is solely my responsibility.

I accept responsibility for any and all charges associated with registering for the Summer 2017 term. I understand that I will receive an email regarding my charges and payments once my registration is processed. I understand that in order to receive a full refund, I must drop the course before the first day of instruction, which for Summer I&II is **May 15, 2017**, and for Summer III is **May 30, 2017**.

Student Signature : _____ Date: _____

Home Registrar: _____ Date: _____

Administration Use Only: SAAQUIK SFAREGS
Processed by: _____ Date: _____ Notes: _____