Bates – Bowdoin – Colby
Cross-Registration Form

Students at Bates, Bowdoin, and Colby may take courses at one of the other two institutions with home departmental approval, free of tuition or administrative fees unless special course fees apply. Enrollment in courses is on a “space-available” basis and is limited to one course a semester; students from the home institution will receive first priority in registration. This opportunity is only available when the equivalent course is not offered at the student’s home institution. Students need to be enrolled full time at their home institution to participate. Approvals must be obtained prior to enrollment.

**Student Information:**

Home Institution: (Circle one): Bates Bowdoin Colby

Name: ______________________________________________________ ID: ________________
(First) (Middle) (Last)

Date of Birth: ______ Email: ______________________ Phone: ______________________

Home Address: __________________________________________

**Course Information:**

Offering Institution (Circle one): Bates Bowdoin Colby

Subject, Course Number and Title (e.g. Biology 101: Intro Biology): __________________________

Term: _______ Section: _______ Days/Times: _______________ Credits: _______

Approval of Faculty at Offering Institution:

Signature: ___________________________________________ Date: ______________

Printed Name/Title: _________________________________

Signature of Registrar at Offering Institution:

________________________________________________________ Date: ______________

Approval of Faculty in Equivalent Department at Student’s Home Institution:

Signature: ___________________________________________ Date: ______________

Printed Name/Title: _________________________________

Signature of Registrar of Student’s Home Institution:

________________________________________________________ Date: ______________

By signing below, I am acknowledging that I am registering for this course and am subject to the deadlines, procedures, and policies of the institution where the course is taught. Upon completion of the course, I may request that a transcript be sent to my home institution, which will handle transfer of credit according to its normal transfer credit policies.

Student’s Signature: __________________________________________ Date: ______________