University of Pittsburgh at Greensburg

Cross Registration Request Form

Guidelines:

1. Enrollment is limited to one class per semester/term.
2. Any full-time student enrolled at Pitt-Greensburg may cross register at Seton Hill or WCCC.
3. Cross registration must be approved by Pitt-Gbg Academic Advisor & Registrar, as well as the Host School Registrar.
4. Cross registration does not apply to summer semesters/terms.

Section 1: General Information

1. Student’s: Pitt ID # ____________________________

   *SS # ____________________________ *Birthdate ________________

   (*Required by Seton Hill and WCCC for processing this Request)

2. Student’s Name: ___________________________________________________________________

3. Student’s Address: __________________________________________________________________

4. Student’s Telephone #: ( ) ______________ 5. Degree Status: UNDERGRADUATE

6. Academic Status: ______ Freshman  ______ Sophomore  ______ Junior  ______ Senior

7. Home School: University of Pittsburgh at Greensburg  8. Term: ___ Fall ___ Spring 20___

Section 2: Cross Registration Information

***If you choose to drop this course – please notify the Office of the Registrar***

1. Host School

   ______ Seton Hill College  Phone: 724-838-4218  Fax: 724-830-1902

   ______ Westmoreland County Community College  Phone: 724-925-4123  Fax: 724-925-4292

2. Cross Registration Course Request

   Offering Dept  Course Title  Course Ref/Section #  Meeting Days  Times  Bldg/Room  Credits /

   Class

   Lab/Rec

3. Student has met prerequisite course requirements. ________________________________ Advisor’s Signature and Date

Section 3: Signatures

Student _____________________________________________ Date

Academic Advisor Approval _____________________________________ Date

Pitt-Greensburg Registrar Approval ________________________________ Date

Host Registrar Approval _________________________________________ Date

Approved Special Permission Not Available