## THE PEABODY PREPARATORY

## **CROSS REGISTRATION FORM**

(For Full-time University Students Only)

<u>This form must be submitted with an application</u> to complete registration.

(Cross-registration is applicable to fall or spring semesters only).

| •  |   |                  |                       |                     |
|--|---|------------------|-----------------------|---------------------|
| Student Information:                     |   |                  |                       |                     |
|  |   | O Fall 2         | 20                    | Spring 20           |
| Social Security Numb                     | oer er  |                  | ·                     |                     |
| O Mr.                                    |   |                  |                       |                     |
| O Mrs. Last Name                         |   | First Name M.I.  |                       |                     |
| O Ms.                                    |   | Andervanie       |                       |                     |
|  |   |                  |                       |                     |
|  |   |                  |                       |                     |
| Local Address                            |   |                  | City, State, Zip Code |                     |
|  |   |                  |                       |                     |
| Local Phone Number                       |   |                  | Email Address         |                     |
|  |   |                  |                       |                     |
| Home Division:                           | O Arts & Scient O School of En  |                  | O SAIS (Int           | ernational Studies) |
|  | O School of M   |                  |                       | Public Health       |
|  |   |                  |                       |                     |
| Title of Course:                         |   |                  |                       |                     |
|  |   |                  |                       | •                   |
| Individual Instruction:                  |   |                  |                       |                     |
| Class:                                   |   | Class:           |                       |                     |
|  | on processor and the contract of the contract |                  |                       |                     |
| Division Registrar's Use Only:           |   |                  |                       |                     |
|  |   |                  |                       |                     |
| This student meets all the require       | ments as a full-time s  | tudent and may b | be enrolled in the Pe | abody Preparatory.  |
| Please use the <i>University Seal</i> fo | r verification:   |                  |                       |                     |
| •  |   |                  |                       |                     |
| Registrar's Sigi                         | <del></del>   | ·                | Date                  |                     |
| Nogilii wi b oigi                        |   |                  |                       |                     |
|  |   |                  |                       |                     |
| Business Office Use Only:                |   |                  |                       |                     |
| Total Tuition Cost:                      | Balance Due:  |                  |                       |                     |
| Discount:                                | IDA   | Jumber:          |                       |                     |