

# PEPPERDINE UNIVERSITY

## Cross-Registration Enrollment Form

<b>Name (Last, First)</b>				<b>School of Current Enrollment</b>	
<b>Student ID #</b>				<input type="checkbox"/> GSEP	
<b>Requesting Term</b>	<input type="checkbox"/> Fall	<input type="checkbox"/> Summer	<b>2</b>	<b>0</b>	<input type="checkbox"/> Graziadio School
	<input type="checkbox"/> Spring	<input type="checkbox"/> Other: _____			<input type="checkbox"/> School of Law
					<input type="checkbox"/> Public Policy
					<input type="checkbox"/> Seaver College

Course(s) requested for cross-registration			
Course ID	Course Title	Units	School Offering Course

**Briefly explain how each course relates to your current program of study**

I agree to abide by all university policies and procedures as described in all applicable University catalogs, schedules, handbooks, and/or brochures.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Approval of School of Current Enrollment

Cross-Registration Request  Approved  Not Approved

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name & Title: \_\_\_\_\_

### Approval of School(s) Offering the Course(s) Indicated Above

Cross-Registration Request  Approved  Not Approved

Associate Dean Signature \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name & Title: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name & Title: \_\_\_\_\_