

Office of Records and Registration

Permission To Enroll in Another Institution Form

This form must be completed in its entirety before being submitted to the Office of Records & Registration. All information on this form is required.

Name (Last, First, Middle Initial					ne Number			Student ID #		
Address City, State, Zip					State, Zip Cod	jde				
Classification/Credit Hours Completed At CSU Major						Semester/Year When Course Will Be Completed				
Name & Address of Institution Where Coursework is to be done:						Justification:				
Course Information From Other Institution:						Course Equivalent at Coppin State University:				
Course Co	ode	Course Number	Course Title		# of Credits	Course Code	Course Number	Course Title		# of Credit
 Student Must: Attach course description for requested course at other institution. Obtain approval from department Chairperson, Dean, Provost (if applicable) and Registrar <u>BEFORE</u> registering for course at sending institution. Submit completed, approved, & signed form to CSU's Office of Records & Registration. 						Note: A student who is within her/his last 30 credits of completing the degree requirements for the baccalaureate degree MUST obtain the approval of the Provost & Vice President for Academic Affairs BEFORE submitting this form to the Office of Records and Registration.				
4. Request that an official transcript be sent to Coppin State University, Office of Records and Registration, 2500 West North Avenue, Baltimore, MD 21216										
			I have read and unders	tand the conditions ur	nder which pe	ermission is gra	anted to take a c	ourse at another institution.		
Approv	ved _	_Denied Chairpers	on's Signature	Date		Approved	Denied Registrar's	Signature		Date
Approv	ed _	Denied Dean's Si	gnature	Date						
Justification for Disapproval						Justification for Disapproval				