CSU Application for Cross Enrollment
to the California Community or the University of California

Complete form and submit to office of the registrar or other designated cross enrollment office at your home campus prior to the host campus filing period. You must verify admission and filing deadlines with the host campus. After home campus completes certifications, seek instructor approval at host campus during filing period designed by host campus. Host campus will provide registration instructions.

Home Campus _____ Host Campus _____

Planned semester/quarter/term of cross enrollment: Term _____Year _____

If you have previously attended the host campus, that was has last term attended? _____

Name _____
       Last   First   Middle

SFSU ID# _____   Birthdate _____/_____/_____

Mailing Address_____
                  Street   City   State   Zip Code

Home Telephone _(____)_____   Message Telephone_(___)_____

Reason for taking course:

   Course unavailable at home institution _____   General interest in subject _____

   Completing transfer _____   Other _____

I certify the information provided is accurate and that I have read and understand eligibility requirements, enrollment conditions, and procedures as stated.

Date _____   Student Signature _____

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HOME CAMPUS CERTIFICATION

_____ certifies that this student meets cross enrollment eligibility requirements.
Home Campus name/Code

_____
Registrar's Office Signature   Title/Seal   Date

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HOST CAMPUS CERTIFICATION
Approval of class instructor:

Course planned at host campus	Units	Instructor Approval

Processing fee received _____

Cross Enrollment approved _____ Date_____ Host Campus Signature _____

RETURN COPY TO APPROVAL FORM TO : SFSU REGISTRAR'S OFFICE – SSB 101