GOUCHER | college

Baltimore Student Exchange Program
Registration Form – Fall Semester
Office of the Registrar

SSN# : _____ Birthdate: _____

Name: _____
Last (print) First Middle.

Address: _____

_____

City: _____ State: _____ Zipcode: _____

Home Phone: _____ Cell phone:_____ Email Address: _____

Class (Soph, Jr, Sr): _____ Sem/Year Course is Offered: _____

CHECK THE INSTITUTION YOU ARE INTERESTED IN ATTENDING : INFORMATION AVAILABLE AT HTTP://WWW.GOUCHER.EDU/X16965.XML

- □ College of Notre Dame of Maryland
- □ Coppin State College
- □ The Johns Hopkins University
- □ Loyola College
- □ Maryland Institute College of Art
- □ Morgan State University
- □ Peabody Institute
- □ Stevenson University
- □ Towson University
- □ UMBC
- □ University of Baltimore

Course Selection

Dept	Course & Section	Course Title	Day/Time	Credits	Pre-req Required	Pre-req Met	Registered
							□ Yes □ No
							□ Yes □ No

I _____have read and agree to adhere to the academic calendar and policies

of_____while attending this Baltimore Student Exchange Program. (Two courses per academic year)

_____ _____
Student's Signature & Date Adviser's Signature & Date

_____ _____
Goucher - Special Approval if Required & Date Registrar's Office of Goucher College & Date

To the Registrar of the host institution : When the Goucher College student is officially registered for the above named course(s), please sign below and return a copy of this form to the student Administrative Services Office.

_____
Host Registrar's Signature & Date

Return completed request by mail or fax:
Fax # 410-337-6504

Office of the Registrar
Student Administrative Services
Goucher College
1021 Dulaney Valley Road
Baltimore, MD 21204
Phone: 410-337-6090