

AMERICAN BAPTIST SEMINARY OF THE WEST CROSS-REGISTRATION FORM

This form is ONLY for ABSW students wishing to enroll in a course or courses offered by another center or school of the GTU

Enter your information below along with the GTU course information for those classes you hope to take this semester. Submit the completed form to the ABSW Registrar during open registration. Keep in mind that some courses have limited enrollment and will be first come, first served. You will be notified by the ABSW Registrar with the results of your submission as soon as those become available.

SEMESTER:	YEAR:.		
STUDENT INFORMATION			
Name:			Student ID:
Academic Program:			Advisor:
GROSS-REGISTRATION COURSE #1			
Course Name:			
Course #:	Course Section:		Credits:
Instructor Name:			
Instructor School:			
Choose One: Letter Grade	Pass/Fail		Audit
Restricted Course?Y/N	If restricted course, instructor written consent must accompany this form.		
CROSS-REGISTRATION COURSE #2			
Course Name:			
Course #:	Course Section:		Credits:
Instructor Name:			
Instructor School:			
Choose One: Letter Grade	Pass/Fail		Audit
Restricted Course?Y /N	If restricted course, instructor written consent must accompany this form.		
CROSS-REGISTRATION COURSE #3			
Course Name:			
Course #:	Course Section:		Credits:
Instructor Name			
Instructor School:			
Choose One: Letter Grade	Pass/Fail Audit.		
Restricted Course? Y/N	If restricted course, instructor written consent must accompany this form.		
Student Signature: ©			Date:
NOTE: A minimum of one-third coursework must be done at ABSW for most of our programs. Consult your program checklist or speak with your Advisor if you are unsure of your specific program requirements.			
OFFICE USE ONLY			
Approved by Affiliate School? Y N Date Student N		ate Student Notif	ied:
ABSW Registrar:			Date:
Office of the Registrar 510-841-1095 ext. 237 2606 Dwight Way, Berkeley, CA 94704 kcroswell@absw.edu			