

## THE CAROLINA THEOLOGICAL CONSORTIUM Cross Registration Form

**Instructions:** (1) Complete the form in its entirety. (2) Have the GCTS Registrar sign the completed form; a copy will be retained by the Registration Office. (3) Obtain the Registrar's signature from the seminary where the course is being offered. (4) The institution of instruction will keep a copy for their records, the student should keep a copy for his/her records and the original with all signatures must be returned to the GCTS Registration Office to complete the registration process. We will not register the student until the original form, with signatures, has been submitted.

**Please Note:** Cross Registration courses will be treated as Module 1 courses. Therefore the student should adhere to the Module 1 refund calendar with regard to registration, add/drop/withdraw, and pass/fail deadlines. Due dates for course work will be determined by the campus where the course is offered. The student is responsible for notifying the registration offices at both campuses (GCTS and the seminary of instruction) in writing if s/he drops or withdraws from this course.

**Student's Name:** \_\_\_\_\_ **ID#:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Campus of Instruction:**       RTS       CIU       ERSKINE

**Course # and Name:** \_\_\_\_\_

**Course Instructor:** \_\_\_\_\_ **Semester/Acad Yr:** \_\_\_\_\_

**Credit Hours:** \_\_\_\_\_ *(only 3-credit hour courses will be approved for cross-registration)*

**GCTS degree requirement satisfied with this course:** \_\_\_\_\_

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

**GCTS Registrar Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Teaching Institution Registrar Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_