INTER-INSTITUTIONAL COURSE ENROLLMENT APPLICATION

Name: ____________________________  Today’s Date _____________________
Address ___________________________  Phone __________________________

I wish to enroll for a grade (no audit) in the following course during the ☐ FALL  ☐ SPRING term of the academic year ____________________.

Course No. ____________________________  Title ____________________________  Instructor ______________________________
Department ___________________________

Information about courses offered is available either at the Office of the Registrar (Rm. 208 Templeton Hall), Princeton Theological Seminary or at the Office of the Registrar (101 West College), Princeton University.

TO THE INSTRUCTOR IN CHARGE OF THE COURSE: The student named above wishes to enroll in your course. If there is room and you judge him/her qualified for the work and you wish him/her to join the course, please indicate your approval by signing below. This form is then to be returned to the student.

________________________________________
Signature

TO THE STUDENT: Once you have permission from the Instructor in charge of the course, please return both copies of this form to:

208 Templeton Hall at PTS if you are a Princeton University student enrolling in a Seminary course (leave original copy). Take the second authorized copy with your completed course card to the Office of the Registrar at Princeton University.

101 West College (Registrar, PU) if you are a Seminary student enrolling in a University course (leave original copy). Take the second copy to the Office of the Registrar at PTS.

________________________________________
For Office Use  Date ____________________________
☐ PTS
☐ PU

________________________________________
Authorized Signature