

☐ Fall

Semester:

Office of the Registrar Rutgers, The State University of New Jersey 683 Hoes Lane West, Room 110 Piscataway, NJ 08854

Year

sph.rutgers.edu sphregistrar@sph.rutgers.edu p. (732) 235-9724/4316 f. (732) 235-9599

## **BA/BS/MPH Cross-Registration Form**

This cross-registration form is to be completed by BA/MPH or BS/MPH articulated degree program students who are registering for Rutgers School of Public Health (SPH) coursework while enrolled in the undergraduate portion of their articulated degree program. Articulated degree students must receive approval from their Undergraduate Advisor and School of Public Health Advisor to enroll in School of Public Health coursework while completing the undergraduate portion of their articulated degree program. Approval from the Undergraduate Major Advisor may also be required. Articulated degree students may take a maximum of 18 credits with the SPH while enrolled in the undergraduate portion of the program.

After receiving this completed form, the SPH Office of the Registrar will update the student's School of Public Health schedule. Students will receive a special permission number (SPN) and will be required to cross-register through their home school registration system within 48 hours of receiving their SPN. Failure to complete registration with the provided SPN may result in courses being dropped from the SPH student schedule. Articulated degree students will be billed at their home school undergraduate tuition rate for Fall and Spring courses. Summer courses will be billed at the SPH graduate level tuition rate (NJIT students are billed at the SPH graduate level tuition rate for any semester.)

■ Summer

Spring

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1.	Name:				First Name Middle Init.		Student ID#:			
				Firs			ial		Last 4-digits of SSN	
2.	Rutgers Email Address:						Date of Birth:			
3.	Perma	nent Maili	ng Address:							
	Include Number, Street and Apt. N		treet and Apt. Nu	nber Ci		ity State			Zip Code	
4.	Phone Numbers:									
	•			'	ne Number (incl. area code)		Mobile Telephone Number (incl. area code)			
5.	Citizenship: U.S. U		U.S. Perr	nanent Resider	nt (holding a green ca	ırd)				
			Internation	al Student	Status					
6.	New Je	New Jersey Residency: ☐ Yes, I am a NJ resident ☐ No, I am not a NJ resident								
7.	Underg	Undergraduate School: ☐ RU-NB (			ustein+Any School)	RU-NB (SAS&Non-B	loustein) 🔲 F	RU-NB (SEE	S&Non-Bloustein)	
		- RU-Camd		·	AA, SCJ, SAS)	□ RU-NWK (Er	,	·	NJIT	
	_	ixo-oaina		-ivvit (01 /	AA, 000, 0A0)	- NO-NWIT (LI	iv oci ilitii at	Jaiety)	<b>4</b> 14311	
Add/Drop		CRN#	Course No.	Section		Course Title		Credits	Location	
Drop		12345	PHCO 0504	030	Introduction to Biostatistics (example only)		3	New Brunswick		
_										
Student Signature						Date				
Undergraduate Advisor Signature D										
	Underg	raduate M	ajor Advisor Si	gnature (as	needed)	Date	Date		Copies to: UG Academic Advisor	
			<del></del>	<u> </u>					ajor Advsior	
SPH Graduate Academic Advisor Signature						Date		SPH A	Associate Dean nt	
SPH Office of the Registrar Signature						Date				