

Application for Cross Enrollment California State University or University of California

Complete form and submit to the Admissions and Records Office at Monterey Peninsula College (MPC) prior to host campus filing period. You must verify admission and filing deadlines with the host campus. After MPC completes certification, seek instructor approval at host campus during filing period designated by host campus. Host campus will provide registration instructions.

Home Campus: Monterey	Peninsula College	<u>)</u> H	ost campus: _			
Planned semester/quarter/term of cross enrollment: Term				(University) Year		
If you have previously atte	naea the nost can	npus, wnat was	tne last term	attended: Term		
Name				ocial Security Numbe	r	
Last	First	Middle	9			
Birth Date/	_/	e-mail add	Iress			
Mailing address						
Street		City		State	Zip Code	
Home telephone ()		N	lessage telep	ohone ()		
Reason for taking course:						
Course unavailabl	le at home institut	ion G	eneral interes	st in subject		
Completing transf	er	0	ther			
I certify the information procedure		e and that I have	e read and un	derstand eligibility re	quirements, enrollment	
Date	te Signature					
* * * * * * * * * * * * * * * *	· • • • • • • • • • •		• • • • • • •		* * * * * * * * * * * * * *	
	MONTER	REY PENINSULA	COLLEGE CEI	RTIFICATION		
Monterey Peninsula Colle	ge certifies that th	nis student mee	ts cross enrol	lment eligibility requi	rements.	
Signature:						
Name/Title					Date	
		HOST CAMPUS	CERTIFICATI	UN		
Approval of class instructo						
Course plan			its		tructor	
Host cam	pus	Quarter	Semester	Aļ	proval	
Processing fee received _						
Cross enrollment approve	d Date		_ Signature _			