



Please Print Clearly

Student Name: _____ RUID: _____

Address: _____

School: _____ Telephone: _____

SSN: _____ Gender: _____ D.O.B.: _____

GSNB, RWJMS, GSBS, SPH CROSS REGISTRATION

TO _____ DATE _____

The Instructor—RWJ Medical School or Graduate School of Biomedical Sciences or School of Public Health

_____, is a graduate student enrolled at the Graduate School-New Brunswick. It is requested that he/she be permitted to attend the course(s) indicated below during the _____ term, and that upon completion of the term, his/her grade be submitted to the Registrar via regular grade submission (student will be on your roster).

SIGNATURES _____

Student's Adviser

Student's Dean

This form should be completed by the student and routed as follows:

1. Obtain your adviser and dean's signatures (secure special permission number from the dean, if necessary—see #4 below);
2. Obtain the signature of the course instructor for consent to enroll;
3. Submit form to the Registrar, RWJ Medical School, Graduate School of Biomedical Sciences, or School of Public Health. Upon completion of the course the Registrar will send a transcript of your grade(s) to the Rutgers Graduate Registrar for inclusion on your transcript.
4. You must register for 16:001:815 or 34:001:815 (depending on your school of registration) using the index number listed in the Rutgers New Brunswick graduate class schedule for the same term for the appropriate number of credits. A special permission number obtained from the Dean's Office is required fro 16:001:815, but not for 34:001:815. (This pseudo-course is not graded—for billing purposes only.)

Course #	Title	Permission Granted Instructor's Signature

TO: Registrar—Robert Wood Johnson Medical School, or
Registrar—Graduate School of Biomedical Sciences, or
Registrar—School of Public Health

Please send my grade(s) via official transcript to the Graduate Registrar, Rutgers University, Piscataway, NJ.

STUDENT SIGNATURE: _____

Richard Bird, Registrar
Rutgers University