## BOSTON UNIVERSITY CROSS REGISTRATION PETITION

## **INSTRUCTIONS:**

1. Complete all the information below and return to the Registrar's Office of the Host Institution.

2. Retain the pink copy for your records.

| B.U. ID # or S.S. #   |          |     |  |   |   |   |                         |   |       | Gender: (Circle One)         |    |      |          |     | MALE |     |           |   | FEMALE                     |    |  |  |
|---|----------|-----|--|---|---|---|-------------------------|---|-------|------------------------------|----|------|----------|-----|------|-----|-----------|---|----------------------------|----|--|--|
| Date Of Birth:  |          |     |  |   |   |   |                         |   |       | Telephone Number:            |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    | _    |          |     |      | ] – |           |   |                            |    |  |  |
| Name: (Last Name, First Name Middle Initial)                      |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| Street Address:   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| City:   |          |     |  |   |   |   |                         |   |       |                              |    |      | State:   |     |      | Zir | Zip Code: |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     | ]    |     |           | - |                            |    |  |  |
| Province & Country: (If Foreign A                                 | (ddress) |     |  | 1 | 1 |   |                         | I | I     | I                            |    |      | L        | I   | ]    | L   |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          | L L |  | I | 1 | L |                         | L | 1     |                              | J  |      | I        | L   | L    | 1   |           |   |                            |    |  |  |
| Semester: (Circle One)<br>FALL SPRING                             |          |     |  |   |   |   |                         |   | Year: |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| NOTE: ALL signatures are required to complete Cross-Registration! |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| HOME INSTITUTION  |          |     |  |   |   |   |                         |   |       |                              | НО | ST I | NST      | ITU | TIOI | N   |           |   |                            |    |  |  |
| Institution:  |          |     |  |   |   |   | Institution:            |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| Registrar's Signature:  |          |     |  |   |   |   | Instructor's Signature: |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| Advisor's or Dean's Signature:                                    |          |     |  |   |   |   | Registrar's Signature:  |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| COURSE INFORMATION  |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| Course Number:  |          |     |  |   |   |   |                         |   |       |                              |    |      | Section: |     |      |     | Credits:  |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   | et false en general en mis |    |  |  |
| Course Title:   |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    |      | Da       | te: | 7    | r   | 1         | 1 | r                          | ,, |  |  |
|   |          |     |  |   |   |   |                         |   |       |                              |    | _    |          |     |      |     |           |   |                            |    |  |  |
| Student Signature:  |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| IMPORTANT: Read 1974 Privacy Act on reverse side and circle one:  |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| CHECK TO RESTRICT. SEE REVERSE TO RESTRICT SPECIFIC DATA.         |          |     |  |   |   |   |                         |   |       |                              |    |      |          |     |      |     |           |   |                            |    |  |  |
| White Copy: Host Registrar Yellow Copy: Home Regi                 |          |     |  |   |   |   |                         |   |       | Registrar Pink Copy: Student |    |      |          |     |      |     |           |   |                            |    |  |  |

## **Directory Information Restriction** Use this form to manage public access to your data at Boston University

The Family Educational Rights and Privacy Act (FERPA) protects the privacy of your education records and restricts disclosure of personal information from your education records, except as authorized by law. For information on Boston University's FERPA policy, please refer to the Registrar's Office website at www.bu.edu/registrar.

The University has designated certain types of personally identifiable information as "Directory Information." A list of this information is set forth below. Unless restricted, Boston University may disclose any of the items of Directory Information without your consent.

Boston University will not release grades or GPA information without your prior consent. In addition, Boston University does not provide student lists outside the University for purposes of marketing.

To control access to your Academic Information, you must use the Consent to Disclosure feature on the Student Link.

Any and all data that you restrict below will not be released outside the University.

If you wish to restrict the release of your Directory Information, you may do so by using the Student Link, by completing the information below, or by visiting the Office of the University Registrar.

Name: \_\_\_\_\_\_

Check to restrict:

- \_\_\_\_ Academic program (degree, major, minor)
- \_\_\_\_ Dates of attendance, Full-time / Part-time status
- \_\_\_\_ Degrees, honors, and awards received
- \_\_\_\_ Email Directory Look up
- \_\_\_\_ Local address and primary contact phone number
- \_\_\_\_ School or College

Signature: \_\_\_\_\_

BUID or SS Number:

Please return to:
Boston University Office of the University Registrar 881 Commonwealth Avenue, 2<sup>nd</sup> floor
Boston, MA 02215
Phone: 617-353-3612
Fax: 617-358-1689

Date: