



UNIVERSITY OF DELAWARE AND THOMAS JEFFERSON UNIVERSITY RECIPROCAL REGISTRATION PERMISSION FORM

SECTION 1: STUDENT INFORMATION AND HOME INSTITUTION APPROVALS

STUDENT NAME, DATE OF BIRTH, STUDENT'S GRADUATE PROGRAM, UDID OR TJU CAMPUS KEY, STUDENT HOME INSTITUTION, STUDENT'S HOME INSTITUTION E-MAIL, STUDENT SIGNATURE, DATE

NOTE: In signing, I understand that: I authorize the Coordinator at my home institution to confirm completion of health record requirements at my home institution and to share demographic information (e.g. preferred address and emergency contact information) with the partner institution. I may be required to complete additional administrative requirements (e.g. HIPAA training, child abuse clearance, mandatory flu shot, safety training) in accordance with requirements of a specific course and/or program at the partner institution; and I must notify the partner institution if I fall below full time at my home institution.

SECTION 2: COURSE INFORMATION

SEMESTER DURING WHICH COURSE WILL BE TAKEN AT PARTNER INSTITUTION (Check one) [ ] FALL [ ] WINTER [ ] SPRING [ ] SPRING, COURSE NAME AND NUMBER AT PARTNER INSTITUTION, CREDITS, COURSE NAME AND NUMBER AT HOME INSTITUTION\*, CREDITS\*, ACADEMIC PROGRAM APPROVAL NAME, STUDENT SIGNATURE, DATE

\*N/A indicates there is not a comparable course at your home institution.

FOR HOME INSTITUTION USE ONLY

CHECKLIST: [ ] STUDENT IS FULL TIME, MATRICULATED [ ] MEDICAL HISTORY [ ] MEDICAL INSURANCE [ ] EMERGENCY CONTACT INFORMATION, [ ] STUDENT IS IN GOOD STANDING [ ] IMMUNIZATION RECORD [ ] SAFETY TRAINING COMPLETED, [ ] UNIVERSITY OF DELAWARE OFFICE OF GRADUATE AND PROFESSIONAL EDUCATION [ ] APPROVED, [ ] THOMAS JEFFERSON UNIVERSITY REGISTRAR [ ] NOT APPROVED, SIGNATURE, DATE

FOR PARTNER INSTITUTION USE ONLY

[ ] PERMISSION OF ACADEMIC DIVISION HAS BEEN OBTAINED [ ] SAFETY TRAINING REQUIREMENT REVIEWED, [ ] NOT REQUIRED [ ] NOT REQUIRED, [ ] UNIVERSITY OF DELAWARE OFFICE OF GRADUATE AND PROFESSIONAL EDUCATION [ ] APPROVED, [ ] THOMAS JEFFERSON UNIVERSITY REGISTRAR [ ] NOT APPROVED, SIGNATURE, DATE