

**VIRGINIA CONSORTIUM**  
*(course sharing among commonwealth colleges and universities)*  
**PARTICIPANT INFORMATION FORM**

**STUDENT INFORMATION**

Student's Last Name First Name Middle Initial

Last 4 Digits of SSN Date of Birth Student's Phone Number

E-mail Address: \_\_\_\_\_

My Home Institution: \_\_\_\_\_

I am requesting permission to study at: \_\_\_\_\_

Offering Institution

**CLASSES REQUESTED**

| Course Title/Subject | Course Number | Number of Credits |
|----------------------|---------------|-------------------|
|                      |               |                   |
|                      |               |                   |
|                      |               |                   |
|                      |               |                   |

Home Institution Course Approval: \_\_\_\_\_ Date: \_\_\_\_\_

- The academic regulations of the home institution govern changes in course registration of the participating student. These changes pertain to: dropping and adding courses, withdrawal from enrollment, and change of grade type (from A-F to Pass/Fail or Credit/No Credit or Audit).
- Students receiving a grade of Incomplete will have a time limit not in excess of that of their home institution. Faculty may impose an earlier deadline.
- Grade appeal policies and procedures are those of the offering school. Students should reference the on-line catalog of the offering school regarding grade appeal policies.
- Students are required to follow the regulations governing academic integrity at the offering institution. In the event of academic dishonesty or misconduct, the offering institution has the authority to proceed according to its regulations regarding the particular course, future enrollments and any change in the student's status. Students should consult the catalog or related handbook of the offering institution regarding academic integrity policies.

**STUDENT ACKNOWLEDGEMENT OF AGREEMENT REQUIREMENTS**

Student ID# at Home Institution: \_\_\_\_\_

My signature indicates that I have read and agree to the above policies.

\_\_\_\_\_/\_\_\_\_\_  
Student's Signature Date

**HOME INSTITUTION REGISTRAR INFORMATION AND APPROVAL**

Student's Level: ☐ Undergraduate ☐ Graduate  
Student's Domicile Status: ☐ In-State ☐ Out of State

Registrar's  
Seal

\_\_\_\_\_/\_\_\_\_\_  
Home Institution Registrar Approval Date

**OFFERING INSTITUTION INFORMATION AND APPROVAL**

Student's ID Number at Offering Institution (Once Assigned): \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_  
Offering Institution Approval Date