

# Course Exchange Appeal Form

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Send the completed form to your home campus.

**Concordia College:** Registrar's Office, Lorentzen 140, registrar@cord.edu

**Minnesota State Community and Technical College (M State):** Registrar's Office, M State Moorhead Campus D123, tricollege@minnesota.edu

**Minnesota State University Moorhead (MSUM):** Registrar's Office, Owens 210, registrar@mnstate.edu

**North Dakota State College of Science (NDSCS):** Registrar's Office, Haverty Hall 101, ndscs.studentrecords@ndscs.edu

**North Dakota State University (NDSU):** Office of Registration and Records, Ceres Hall 110, <https://filetransfer.ndsu.edu/filedrop/ndsu.registrar@ndsu.edu>

**Eligibility:** Students are eligible to enroll in two courses per campus/per semester for courses not offered at the home institution in a given term or semester. The form must be completed by the student and approved & signed by their advisor prior to submission to their home campus registrar's office. There are three automatic exceptions to the eligibility criteria:

1. The course is required for a declared Tri-College minor not offered at the home campus.
2. Enrollment in Aerospace Studies/Air Force ROTC or Military Science/Army ROTC.
3. The student is in their last academic year and needs the specific course(s) to graduate and fulfill degree requirements and there is not an equivalent course being offered at their home campus or another course that may be substituted in that academic semester as documented by their home campus.

All other requests for exceptions to registration guidelines must be submitted for consideration via this appeal form.

My <u>HOME</u> campus is:	Concordia College	M State	MSUM	NDSCS	NDSU
I am seeking enrollment at:	Concordia College	M State	MSUM	NDSCS	NDSU

Legal Name Last \_\_\_\_\_ First \_\_\_\_\_ MI: \_\_\_\_\_

Home Campus Student ID # \_\_\_\_\_ Home Campus Email \_\_\_\_\_ .edu

Expected Date of Graduation Fall Spring Summer 2025 2026 2027 2028 2029 2030 2031

Requested Enrollment: Fall Spring 2025 2026 2027

Course Subject	Course Number	Course Title

**Reason for Appeal:**

I would like to register for more than two courses through the course exchange agreement.

I would like to register for a course that is offered by my home campus **and** the exception criteria do not apply for me.

Other

Please give a detailed reason for appeal, and attach additional sheets, if needed.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Advisor Signature \_\_\_\_\_

Date \_\_\_\_\_

**OFFICE USE ONLY**

Approved Denied

Provost (or designee) Signature \_\_\_\_\_ Date \_\_\_\_\_