Collaborative Student Contract & Registration Form

Submit form to: Office of Registration & Records, NDSU Dept. 2831, P.O. Box 6050, Fargo, ND 58108-6050, Fax 701-231-8959, Ceres Hall 110

Please read the policies and procedures of being a collaborative student carefully before completing and signing form.

A collaborative student is one who chooses to enroll at more than one North Dakota University System (NDUS) institution for a particular term. The institution from which the student is earning a degree is considered the "home institution". The institution(s) that supplies courses for a degree is considered the 'provider institution(s)'. The following guidelines pertain to courses taken collaboratively:

1. A student must be enrolled in at least one degree credit course at NDSU before enrolling in a collaborative course including the summer semester. Excluded from this requirement are students using the faculty/staff tuition waiver.
2. Only degree seeking undergraduate students in good academic standing (GPA of 2.0 or higher) are allowed to enroll collaboratively.
3. The collaborative process allows NDSU to combine credits from more than one NDUS institution for the purpose of financial aid (for courses added through the seventh business day from the start of the term).
4. Collaborative courses are not subject to the NDSU tuition cap.
5. The student pays provider campus tuition/fees for collaborative course(s). This additional amount is included in the student's accounts receivable balance at NDSU.
6. Not all scholarships/tuition waivers cover collaborative tuition and fees. Please check with your funding agency.
7. Students must be in good financial standing to be eligible for collaborative coursework registration.
8. The student cannot exceed a total of 20 credits between NDSU and the provider institution(s) without special permission from the Registrar at home and provider campuses.
9. The student must follow NDSU's academic dates and deadlines for adding/dropping collaborative courses.
10. Drop/adds must be administered by submitting an updated collaborative registration form to the home institution. NDSU students may submit the form to the Office of Registration and Records, 110 Ceres Hall.
11. Courses will be posted to the NDSU academic record as transfer credit once NDSU receives an official transcript from the provider institution. Note: Grades earned in collaborative courses may be used in determining financial aid satisfactory progress.
12. A student's last 30 credits of a degree program must be earned in residence at NDSU. Any student taking credits within the last 30 must submit an Appeal for Exception to Academic Regulations to the Office of Registration and Records.
13. Completion of the Collaborative Student Contract and Registration Form does not guarantee registration into the requested course(s). Registration is not considered completed until the student has received confirmation of enrollment from the provider campus. The confirmation of registration will be sent to the student's NDSU email address. If the request(s) cannot be processed, the student will be notified via their NDSU email address by the collaborative contact at NDSU.
14. Collaborative registration is not an option for repeating courses previously taken at NDSU. If students wish to take advantage of the repeated course opportunity to improve a grade, that course must be repeated at NDSU.
15. Due to federal compliance, course repeats via collaborative registration will be prohibited to prevent significant federal financial aid impacts which could result in overpayment of federal financial aid funds.
16. The option to wait-list is subject to the provider institution's discretion and does not guarantee enrollment into the requested course(s).
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Student Information:
Legal Name  Last: ___________________________  First: ___________________________  MI: ___________  Student ID #: ___________________________
Student ID #: ___________________________  Local Telephone Number: ___________________________
NDSU Email Address: ___________________________ (Communication will only occur via NDSU email)
Local Address: Street/P.O. Box ___________________________  Apartment # ___________________________
City ___________________________  County ___________________________  State ______  Zip Code ___________________________

Are you a ND resident? ___ Yes ___ No  If Yes, length of residency? ______ If No, state of residency? ___________________________
Do you have an arrangement with a Third Party to pay for your tuition and fees? ___ Yes ___ No

The Campus Providing the Course(s):
(If you plan to take courses at multiple campuses, please complete a form for each provider campus.)

List courses you wish to enroll in:

<table>
<thead>
<tr>
<th>Department</th>
<th>Course No.</th>
<th>Course Title</th>
<th>Number of Credits</th>
<th>Course ID/Class Number</th>
<th>Delivery Method:</th>
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<td>3. Print-based</td>
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List courses you wish to drop:

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<th>Department</th>
<th>Course No.</th>
<th>Course Title</th>
<th>Number of Credits</th>
<th>Course ID/Class Number</th>
<th>Delivery Method:</th>
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Student Consent to Release Educational and Financial Records: Pursuant to the Family Educational rights and Privacy Act of 1974, as amended, I hereby consent to the release of the information concerning my academic and financial records to the provider campus, as indicated above. I also grant permission to the provider campus listed about to release an official transcript to the home campus once the course grades have been posted. I understand that such records may not be released except on the condition that the party to which the information is being released will not permit any other party to have access to such information without my written consent. I also agree to have the home campus, listed above, act on my behalf regarding registration and billing as it pertains to the provider campus.

As a collaborative student, I have read and understand the policies and procedures of being a collaborative student and accept all responsibilities and consequences as such:

_________________________  ___________________________
Student Signature  Date

NDSU Registration and Records Staff Use Only
Student’s residency status ___________________________