#### Inter-University Doctoral Consortium Registration Form

Columbia University / Fordham University / Graduate Center, CUNY / New York University New School for Social Research / Princeton University / Rutgers University / Stony Brook University / Teachers College, Columbia University

#### Instructions for the Inter-University Doctoral Consortium Registration Form

#### Student:

- 1. Please print all information.
- 2. Contact the IUDC Coordinator's Office at the Home School for instructions on completing administrative matters there FIR ST.
- 3. If necessary, contact the IUDC Coordinator's Office at the Host School for instructions on completing administrative mat ters there. Please review instructions at: http://gsas.nyu.edu/page/grad.scholarlyprograms.interuniversitydoctoralconsortium
- Make 2 copies of this form: 1 for the Host School and 1 for your own records. Return the original copy to the IUDC Coordinator's Office at the Home School.

First Name	MI
Term Started in Program: Fall / Sp	oring (please circle) 20*
Term for IUDC Course Enrollment	: Fall / Spring (please circle) 20
Pb	one #
en years of full-time study (or the equ	uivalent) from the date of first enrollm ent.
HOME SCHOOL INFORMATION	I
5	mpleted one full year of YES or NO r the equivalent? (please circle)
Degree (consortium is	for doctoral students only):  Ph.D. Ed.D.
signature)	Date
	Date
This is a student in good standing at the home institution: please check [ ].	
HOST SCHOOL INFORMATION	
Departme	ent and Division:
_ Course Title:	Course Credits:
Please Print Name	Date
	Date
TO DROP THIS COURSE, SIGN BELOW AND SUBMIT THIS COPY TO THE HOST UNIVERSITY. IN ADDITION, PLEASE FOLLOW YOUR HOME SCHOOL'S GUIDELINES REGARDING WITHDRAWING AND/OR DROPPING THE COURSE.	
	Date
I AUTHORIZE THE RELEASE OF MY ACADEMIC TRANSCRIPT TO THE IUDC COORDINATOR AT MY HOME INSTITUTION AFTER THE FINAL GRADE HAS BEEN POSTED TO MY RECORD.	
	Date
	Term Started in Program: Fall / Sp Term for IUDC Course Enrollment Ph n years of full-time study (or the equ HOME SCHOOL INFORMATION Have you col enrollment of Degree (consortium is ignature) institution: please check [ ]. HOST SCHOOL INFORMATION Course Title: Departme Please Print Name JBMIT THIS COPY TO THE HOST S REGARDING WITHDRAWING AN C TRANSCRIPT TO THE IUDC CO TO MY RECORD.

## **CONTACT INFORMATION**

# IUDC

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