ND/SMC Co-Exchange Form

Return this form to the Saint Mary's College Registrar's Office (162 Le Mans Hall or registrar@saintmarys.edu)

PERSONAL INFORMATION

☐ I am a Notre Dame student wishing to take a Saint Mary's course ND ID#

☐ I am a Saint Mary's student wishing to take a Notre Dame course SMC ID#

If SMC, are you participating in the 4/1 Engineering Program with ND? ☐ Yes ☐ No

Last Name First Name Middle Name

Home Institution Email Birth Date

Perm Address City State Zip

Country (if not U.S.) Local Phone Gender

Major Minor Classification next semester

Date

COURSE INFORMATION

CRN #	Dept & Course	Course Title	Credit	Time	Days	Dept Approval
Example: 77000	PSYC 156	Introduction to Psychology	3	11:00 - 12:15	T R	

If any of the above courses has a prerequisite, how do you fulfill that prerequisite? (attach unofficial transcript if necessary)

Office of the Registrar ~ Saint Mary's College ~ 162 Le Mans Hall ~ Notre Dame, IN ~ 46556

Phone: (574) 284-4560 ~ Fax: (574) 284-4842 ~ Email: registrar @saintmarys.edu

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