## **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				
O 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?				
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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 Classification next semester				
			Dat	te
<u>COURSE INFORMATION</u>				
COURSE INFORMATION				
CRN # Dept & Course T	itle Credit	Time	Days	Dept Approval
	Credit	Time 11:00 - 12:15	Days T R	Dept Approval
CRN # Dept & Course T  Example: PSYC 156 Introduction to F	Credit			Dept Approval
CRN # Dept & Course T  Example: PSYC 156 Introduction to F	Credit			Dept Approval
CRN # Dept & Course T  Example: PSYC 156 Introduction to F	Credit			Dept Approval
CRN # Dept & Course T  Example: PSYC 156 Introduction to F	Credit			Dept Approval
CRN # Dept & Course T  Example: PSYC 156 Introduction to F	Credit			Dept Approval
CRN # Dept & Course T  Example: PSYC 156 Introduction to F	Credit			Dept Approval
CRN # Dept & Course T  Example: PSYC 156 Introduction to F	Credit			Dept Approval
CRN # Dept & Course T  Example: 77000 PSYC 156 Introduction to F  Dept & Course T  Introduction to F  Dept & Course T  Introduction to F  Dept & Course T  Dept	Credit			Dept Approval
CRN # Dept & Course T  Example: 77000 PSYC 156 Introduction to F	Credit			Dept Approval

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