The Claremont School of Theology Incomplete policy remains in effect for all cross-enrollment courses.

Students should be aware that the schools listed below have different grade submission deadlines. The Registrar’s Office cannot guarantee that grades will be received by CST deadlines. Students registering for cross-enrollment courses in their final semester do so with the understanding that it may delay their graduation.

Student Name: ___________________________________________  Student ID #: __________________

Student Signature: _______________________________________  Date: __________

Semester/Year: ____________________

Academic Advisor Approval: ___________________________________________

Name  Signature

School:

☐ Claremont Graduate University  ☐ Pitzer College  ☐ Pomona College  ☐ UWest  ☐ AJR/CA

Course # and Title: _____________________________________________

Units: _____  Grade Option: 的选择 Letter Grade  Pass/Fail  Audit  Day & Time: ________________________

Instructor: ____________________________________________________

Name  Signature

Instructor Email: ______________________________________________

Department Chair Signature (Pomona College) ______________________

School:

☐ Claremont Graduate University  ☐ Pitzer College  ☐ Pomona College  ☐ UWest  ☐ AJR/CA

Course # and Title: _____________________________________________

Units: _____  Grade Option: 的选择 Letter Grade  Pass/Fail  Audit  Day & Time: ________________________

Instructor: ____________________________________________________

Name  Signature

Instructor Email: ______________________________________________

Department Chair Signature (Pomona College) ______________________

School:

☐ Claremont Graduate University  ☐ Pitzer College  ☐ Pomona College  ☐ UWest  ☐ AJR/CA

Course # and Title: _____________________________________________

Units: _____  Grade Option: 的选择 Letter Grade  Pass/Fail  Audit  Day & Time: ________________________

Instructor: ____________________________________________________

Name  Signature

Instructor Email: ______________________________________________

Department Chair Signature (Pomona College) ______________________