

Pace University Cooperative Program/Consortium

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Stu	den	t ID	No.																									
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Las	t Na	me				•			•		•										-							
First Name MI																												
TERM/YEAR:				□ F	all _					Spring																		
Current Major: (Please check one box)			oox)	□ Business Management									Communications Arts							🗆 Er	nglis	sh 8	& W	orld	Lit			

The above named student has permission to attend Pace University for the indicated term. The student must be registered for a total of 12 to 15 credits with a maximum of 6 credits at Pace University and a minimum of 6 credits at Marymount Manhattan College

		PACE UNIVERSITY		MARYMOUNT MANHATTAN COLLEGE								
	A. To Be	Completed by Student	-Enter	B. To Be Completed by Department and/or Division Chair								
Pace	University	Course Information b	elow									
Dept	Course #	Course Title	Credits	MMC Course Number*	Department Chair Approval	air AIP If AIP Substitution Designation Division Chair App (CP, EP, IP, NP, REP, UP)						
PERM	IISSION TO	о Таке тне <mark>А</mark> воvе-L	Снеск									
1. Is c	currently e	enrolled as a junior or	🗆 Yes 🗆 No									

2. Has achieved a cumulative GPA of 3.0 or better
3. Is a Business Management, Communications Arts, or English Major
4. Expresses desire to continue studies at Pace University in the Master of Science in Publishing degree program
Yes
No

Signature:

Date of Approval :_____

Peter Naccarato, Coordinator of the MMC-Pace Joint Program in Publishing

Instructions to the Student:

- 1. Bring the course description to Peter Nacarato, Ph.D whose signature is required. (255 E. 71St., Room 500).
- 2. Obtain validation from the Center for Student Services.
- 3. Leave one form with the Center for Student Services and bring one form to Pace University.
- 4. It is your responsibility to have your transcript from Pace University sent to the Center for Student Services at Marymount Manhattan College when you have completed your course(s).

STUDENT RELEASE STATEMENT

By taking part in the cooperative program with Pace University, I understand that I must maintain fulltime status at Marymount Manhattan College and any adjustment to my schedule from the approved courses may result in the loss of institutional and Federal financial aid.

I hereby grant permission to Pace University to release any information regarding my account, including registration status, academic progress, and a copy of my official transcript of coursework, to an authorized representative from the Registrar's Office at Marymount Manhattan College.

I understand that it is my responsibility to request an official transcript of my coursework to be sent to the Center for Student Services at Marymount Manhattan College immediately following the completion of my studies at Pace University. If I fail to provide an official transcript to Marymount Manhattan, I understand that my registration for future terms will be impeded.

Student Signature

Date

PACE UNIVERSITY

This is to certify that this student will be enrolled full-time at Marymount Manhattan College with the additional course(s) listed on the reverse side of this form (limit 6 credits). This student may register for the approved course(s) at Pace University. Pace will send a tuition invoice to MMC with the discounted tuition rate for the above student. Marymount Manhattan College will reimburse Pace University.

STUDENT SERVICES VALIDATION

Registration in CONS 990-01

Date

Initial

Date

Date

Initial

Date
Initial

CENTER FOR STUDENT SERVICES 221 East 71st Street ~ New York, NY 10021 ~ (212) 517-0500 ~ www.mmm.edu