

OFFICE OF EDUCATIONAL SERVICES  
ILLINOIS INSTITUTE OF TECHNOLOGY  
(312) 567-3300

SHIMER COLLEGE  
3424 S. STATE ST.  
(312) 235-3523

STUDENT PETITION  
For Cross- Registration

PLEASE COMPLETE THIS SIDE OF THE STUDENT PETITION AND RETURN TO:  
IIT – THE OFFICE OF EDUCATIONAL SERVICES, ROOM 101, MAIN BUILDING  
SHIMER COLLEGE – 2<sup>ND</sup> FLOOR, OFFICE OF THE REGISTRAR

Name \_\_\_\_\_ Student ID # \_\_\_\_\_  
Last First Middle

Mailing Address \_\_\_\_\_  
Street City State Zip Code

Telephone \_\_\_\_\_ Telephone \_\_\_\_\_  
Home Campus

Major Department \_\_\_\_\_ Specialization/Minor \_\_\_\_\_

**Student Classification:**

Full-time

Part-time

(for IIT)

**Enrollment Status:**

Currently enrolled at IIT

Not currently enrolled at IIT

(for Shimer)

Currently enrolled at Shimer

Not currently enrolled at Shimer

List the courses you wish to complete  
and their course equivalents:

IIT

SHIMER COLLEGE

Credit Hours

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Term you are requesting to take a course:

Spring \_\_\_\_\_  
 Summer \_\_\_\_\_  
 Fall \_\_\_\_\_

Grades of "C" or higher will transfer  
("C-" grades will not transfer)

BRIEFLY EXPLAIN REASON FOR THIS REQUEST

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's Signature

Date

For Office Use Only

SHIMER OFFICE OF THE DEAN

IIT OFFICE OF EDUCATIONAL SERVICES

Petition Approved \_\_\_\_\_  
Signature Date

Petition Approved \_\_\_\_\_  
Signature Date

Petition Denied \_\_\_\_\_  
Signature Date

Petition Denied \_\_\_\_\_  
Signature Date

Registration Accepted \_\_\_\_\_  
Signature Date

Registration Accepted \_\_\_\_\_  
Signature Date

Registration Denied \_\_\_\_\_  
Signature Date

Registration Denied \_\_\_\_\_  
Signature Date