



SUNY Orange
Records & Registration
115 South Street
Middletown, NY 10940
Tel: 845-341-4140
Fax: 845-342-8662

Permission to Attend Another Institution

Name of Student (Last, First, Middle Initial)	Student ID#: A _____
Mailing Address	
City, State, Zip	Telephone:
Current Program of Study at SUNY Orange:	Term you intend to take the course(s):
Student Signature: _____	Date: _____

This Student Has The Permission of SUNY Orange To Enroll At:

College/University Name: _____
Address: _____

COURSE AT OTHER INSTITUTION		EQUIVALENT SUNY ORANGE COURSE	
COURSE NUMBER	COURSE TITLE	COURSE NUMBER	COURSE TITLE

Please be advised that this form does not replace the SUNY Cross Registration Form.
If your intent is to be a Cross Registered student you must submit the official SUNY paperwork.

UPON SUBMISSION OF AN OFFICIAL TRANSCRIPT TO SUNY ORANGE FROM THE ABOVE COLLEGE AND PROVIDING A GRADE OF "C OR HIGHER" IS EARNED IN EACH COURSE, THE COURSE(S) WILL BE APPLIED TO THE STUDENT'S CURRENT UNDERGRADUATE PROGRAM THAT IS INDICATED ABOVE.

DO NOT WRITE BELOW THIS LINE * FOR OFFICE USE ONLY*

Registrar's Signature:	Date Permission Granted
------------------------	-------------------------

Notes: