NCC
NASSAU
COMMUNITY
COLLEGE

Office of the Registrar
One Education Drive
Garden City, NY 11530-6793
Tel 516.572.7355

www.ncc.edu

VISITING STUDENT HOME INSTITUTION APPROVAL

STUDENT INFORMATION

1. Student's Name: Last _____ First _____ Middle _____

2. NCC-ID (if known): _____ Or, Social Security Number (if NCC-ID is not known):_____

3. Date of Birth: _____/_____/_____ (MM/DD/YYYY)

DISCLAIMER: *I have reviewed any prerequisites for the course(s) in which I intend to enroll. I understand these are a condition of my enrollment and I confirm that I have fully satisfied them. I also understand that the college will not be liable for any claims resulting from a misrepresentation of my prior educational record.*

Student Signature _____ **Date** _____

Please print clearly

HOME INSTITUTION: _____

Note: Students can verify matriculation status at their home institution by submitting the National Student Clearinghouse Enrollment Verify Report confirming your enrollment status or having an official from your Home School sign below or submit from your home school any documentation that substantiates your matriculation status.

➢ **Home Institution Official certifying that this student is MATRICULATED at your institution:**

Approving Official's Name: _____ Official's Title: _____

Signature:_____ Date: _____

E-mail address: _____ Office Phone Number: _____

SUBJECT	COURSE NUMBER	CREDITS
Sample: ENGLISH	*Sample: 101*	*Sample: 3*

REGISTRATION: Once your completed application is processed by our office you will receive information in the mail with your NCC-ID and instructions on how to register online for your approved courses. Please be aware of payment due dates. It is advised that you keep a record of courses approved by your institution.

* VIEW AVAILABLE COURSES ONLINE, visit **"Class Schedule"** on the web.

REV. 09/14