Steps to register for Army ROTC as a Consortium Student
updated: 6/20/19

Step 1: Please note: Consortium Registration Form link has changed to: 

Fill out the Cross Registration form online (handwritten forms will not be accepted). You may register for both terms on one form.

Course information is listed within this packet – you do not need instructor’s signature. Army ROTC students are allowed to register for two Army ROTC classes per semester.

Semester breakdown:
Fall semester = A and B terms
Spring semester = C and D terms

Step 2:
Bring the completed Cross Registration form to your school’s Registrar’s Office and they will sign the form first, granting you permission to register. Most schools require the approval signature of an Academic Dean. Your Registrar’s Office will be able to direct you appropriately.

Step 3:
Then bring the signed Cross Registration form to the WPI Registrar’s Office by the specified deadline (listed on page 3) and they will register you for the classes. The WPI Registrar’s office hours are from 8am to 430pm, Monday through Friday.

Sample Course info:

If you are a freshman (MS 1), register for: ML 1021 C01 and ML 1022 D01

Course time: Fri 10:00am -10:50am
Lab time: Thurs 3:00pm - 5:00pm
PT: Mon, Wed, Fri 6:30am - 7:30am

If you are a sophomore (MS2), register for: ML 2021 C01 and ML 2022 D01

Course time: Mon 8:00am – 9:50am
Lab time: Thurs 3:00pm - 5:00pm
PT: Mon, Wed, Fri 6:30am - 7:30am
Cross-Registration Form

Please print. **Complete this form at the home institution before traveling to the host institution.**

Name: ___________________________  ___________________________  ___________________________

Last  First  Middle Initial

Home Institution: ___________________________  Major Area of Study: ___________________________

Mailing Address: ___________________________  Street Address  City  State  Zip

Phone number: ___________________________  Local/Cell  Campus e-mail: ___________________________

Date of Birth: ______/_____/_____  Gender: ______  Class Year: ______

Have you previously taken a course at this Host Institution? Yes  No  If Yes, when? ______/_____/_____  Term & Year

REGISTRATION

(Limited to one course per semester)

Students are encouraged to list an alternative choice in the event their 1st choice is full.

<table>
<thead>
<tr>
<th>Choice #</th>
<th>Host College Name</th>
<th>Department/ Course Number/Section</th>
<th>Course Title</th>
<th>Course Day(s)/Time(s)</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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* You must comply with the requirements of your HOME institution.  Anticipated graduation date: ______/_____/_____  Month, Year

Instructor Signature ___________________________  Date ______

For Closed Courses Only

REQUIRED SIGNATURES

Student ___________________________  Date ______

Approval Signature ___________________________  Date ______  Academic Dean or Approved Signer

Registrar's Office* ___________________________  Date ______  *Signature of Registrar constitutes home institution eligibility

HOME Student ID ___________________________

TO BE COMPLETED BY REGISTRAR OF HOST INSTITUTION  HOST Student ID ___________________________

Registration is  □ Approved  □ Denied  Choice #  1  2

Registrar's Signature ___________________________  Date ______
<table>
<thead>
<tr>
<th>Term</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>D Term: 17 APR</td>
<td></td>
</tr>
<tr>
<td>C Term: 19 FEB</td>
<td></td>
</tr>
<tr>
<td>B Term: 26 NOV</td>
<td></td>
</tr>
<tr>
<td>A Term: 26 SEP</td>
<td>Students Consortium Within 48 Hours of Last Day To Add/Drop Course</td>
</tr>
<tr>
<td>D Term: 27 MAR</td>
<td>Students Consortium Within 48 Hours of Last Day To Add/Drop Course</td>
</tr>
<tr>
<td>C Term: 29 JAN</td>
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<tr>
<td>B Term: 4 NOV</td>
<td></td>
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<tr>
<td>A Term: 5 SEP</td>
<td>W/ Late Fee</td>
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<thead>
<tr>
<th>Course</th>
<th>Term</th>
<th>Semester</th>
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<tbody>
<tr>
<td>Transition To Leadership</td>
<td>D Term</td>
<td>Spring Semester (Spring Course)</td>
</tr>
<tr>
<td>ML 4024/01/2024</td>
<td>D Term</td>
<td>ML 2022 D01/2023</td>
</tr>
<tr>
<td>OfficeShip</td>
<td>C Term</td>
<td>Spring Semester (Spring Course)</td>
</tr>
<tr>
<td>ML 4023 C01/2023</td>
<td>C Term</td>
<td>ML 2022 C01/2023</td>
</tr>
<tr>
<td>Leadership &amp; Ethics I</td>
<td>C Term</td>
<td>ML 2021 C01/2022</td>
</tr>
<tr>
<td>ML 3021/01/2022</td>
<td>C Term</td>
<td>ML 2021 A01/2021</td>
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<tr>
<td>Foundations Of Leadership</td>
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<td>Fall Semester (Fall Course)</td>
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<td>ML 4022 B01/2023</td>
<td>B Term</td>
<td>ML 2021 B01/2022</td>
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<tr>
<td>Leadership &amp; Ethics II</td>
<td>B Term</td>
<td>ML 2021 A01/2021</td>
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<tr>
<td>ML 3022/01/2023</td>
<td>B Term</td>
<td>ML 2021 A01/2021</td>
</tr>
<tr>
<td>Leadership &amp; Management I</td>
<td>A Term</td>
<td>Fall Semester (Fall Course)</td>
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<tr>
<td>ML 4011 A01/2024</td>
<td>A Term</td>
<td>ML 2021 A01/2021</td>
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<tr>
<td>Leadership &amp; Management II</td>
<td>A Term</td>
<td>Fall Semester (Fall Course)</td>
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<tr>
<td>ML 3011 A01/2024</td>
<td>A Term</td>
<td>ML 2021 A01/2021</td>
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WSI ROTC Class Registration 2019-2020
Attention ROTC Consortium Students:

Consortium Students dropping from the Army ROTC program MUST officially withdraw from the Consortium Class

To drop a cross-registered course, the student must complete a Consortium drop/withdrawal form, located at:


Please complete this form and submit to the WPI Registrar’s Office by the specified deadline listed below by term.

Students, who fail to officially withdraw from the course by the specified deadline, will receive a grade of F on their official transcript from their home institution.

Last Day to Withdraw for 2019 – 2020 academic year:

A term: September 26
B term: November 26
C term: February 19
D term: April 17

Please type:
CROSS-REGISTRATION DROP/WITHDRAWAL FORM

<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST NAME</th>
<th>M.I.</th>
<th>DATE</th>
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STUDENT’S HOME INSTITUTION

COURSE TITLE AND NUMBER

HOST INSTITUTION

TO BE COMPLETED BY REGISTRAR OF HOST INSTITUTION:

DROP ☐ WITHDRAWAL ☐

REGISTRAR’S SIGNATURE (HOST INSTITUTION)
Cross-Registration
Temporary
PARKING PERMIT

Host Institution:

Home Institution:

Student Name:

Vehicle Registration Number:

Permit is valid only during DAY course times, and in designated parking areas as determined by the Host Institution.

Permit is distributed by Host institution to full-time, undergraduate Cross-registered students.

Permit must be displayed on dashboard at all times at Host Institution to avoid ticketing.

ALL CADETS must register their vehicle with WPI Campus Police! Please bring your vehicle registration to WPI Campus Police on Boynton Ave.
Worcester Polytechnic Institute
SPORTS AND RECREATION CENTER
AGREEMENT AND RELEASE OF LIABILITY

1. In consideration of becoming a member or being allowed to participate in the activities and programs of the WPI's Sports and Recreation Center [hereafter Sports and Recreation Center] and to use its facilities and equipment, in addition to the payment of any fee, I do hereby for myself, my heirs, executors and administrators, waive, release, and forever discharge Worcester Polytechnic Institute, its employees and agents, from any responsibilities or liability for injuries or damages resulting from my participation in activities or use of equipment in the Sports and Recreation Center. I do also hereby release all of those mentioned, from any responsibility or liability for any injury, including those caused by a negligent act or omission, of any of those mentioned or others acting on their behalf, arising out of or connected with my participation in any activities or the use of any equipment or facilities at the Sports and Recreation Center. (Please initial _______ )

2. I understand and am aware that strength, flexibility and aerobic exercises, including the use of exercise equipment and any Sports and Recreation Center facility, are potentially hazardous activities. I also understand that physical fitness activities involve a risk to and including death and that I am voluntarily participating in these activities and using equipment and facilities with knowledge of the dangers involved. I hereby agree to expressly assume and accept any and all risk of injury and/or death. (Please initial______ )

3. I do hereby further declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity, or other illness that would prevent my participation in any of the activities and programs of the Sports and Recreation Center or use of equipment or facilities. I acknowledge that I have either had a physical examination and have been given my physician's permission to participate, or that I have decided to participate in activity and/or use of equipment and facilities without the approval of my physician and do hereby assume all responsibility for my participation in activities, and utilization of equipment and facilities. (Please initial _______ )

4. I hereby consent to and permit emergency treatment in the event of illness or injury while participating in the activities and programs of the Sports and Recreation Center facilities. (Please initial _______ )

I have read and understand the above provisions and agree to be bound by them, as indicated by my signature below.

Signature

Print Name

Date

Parent or Guardian Signature (if participant under 18)

Print Name

Date

I will be at WPI during the following dates

NOTE: All Sports and Recreation Center users must read and sign this form. Individuals under 18 must also have a legal guardian read and sign. Children under 16 years of age are not eligible to enter the facilities other than for special events or programs.