Northern Arizona College Connection

Common Student Information Form

TERM: YEAR:
❑ Spring _____
❑ Summer _____
❑ Fall _____

Home Institution: ❑ Coconino Community College ❑ Diné College ❑ Navajo Technical University ❑ Northern Arizona University
Home Institution is the degree granting institution and where you will complete the majority of your credits.

Host Institution: ❑ Coconino Community College ❑ Diné College ❑ Navajo Technical University ❑ Northern Arizona University
Host Institution is where you will take courses to transfer back to your Home Institution to meet degree requirements.

PLEASE PRINT Legal Name_____
Last *First* *Middle* *Other Last Names*

Social Security Number: XXX-XX- _____ Home Inst. Student ID: _____ Host Inst. Student ID: _____

Mailing Address:_ _____
Number & Street City State Zip Code

Home/Permanent Address:
❑ Same as _____
Mailing Address Number & Street City State Zip Code

Phone _____E-mail Address: _____

Have you previously registered at the host institution?
❑ Yes ❑ No

Are you an enrolled member of a tribe? ❑ Yes ❑ No
CIB #: _____
Chapter Affiliation: _____

Emergency Contact:
Name_____
Phone Number:_____

Demographic Information:

This information is being gathered for reporting, recordkeeping and financial aid.
Gender: ❑ Male ❑ Female **Birthdate**: Month____ Day____ Year____
Ethnic Status:
Please indicate whether you are: ❑Hispanic ❑ Non-Hispanic
Please indicate all races that apply: ❑White ❑Asian ❑Black
❑ Hawaiian/Pacific Islander ❑American Indian/Alaska Native

Current Enrollment Goal:
❑ Complete course(s) not currently offered at Home Institution
❑ Complete course(s) not offered at Home Institution at a time or day that works with my schedule
❑ Complete course(s) in a different delivery method (for example, online)
❑ Taking Courses to Develop New or Upgrade Current Job Skills ❑ Other _____

HOST INSTITUTION COURSE INFORMATION
Be sure to print information

Course No. & Section (ex, BIO 181 5)	Course Title	Cr. Hrs	Home Institution Course Equivalency (if applicable)	Home Institution Credit Hours

Advisors Signature: Total Hours: Date:

I understand the terms for participating in the partnership between the institutions of the Northern Arizona Consortium for Higher Education. These terms are:

- The partners (Coconino Community College, Diné College, Navajo Technical University and Northern Arizona University) will share my admission and transcript information.
- All information I provide may be retained in the records of both institutions.
- I am subject to all policies, rules, and conditions of each institution in which I am enrolled during any given semester, and I understand that these may differ between the four institutions.

I am also aware that enrollment changes may impact my eligibility for financial aid for the current term and/or future terms. I will consult my Home Institution Financial Aid Office regarding academic eligibility for financial aid, including satisfactory academic progress standards. I understand that I have the right to rescind this authorization at any time by notifying both institutions in writing of my decision. I understand that such revocation will not affect any disclosures previously made before receipt of any such written revocation.

Student's Signature | Date

Office Use Only
Date Registered_____ By_____ NAzCC Office _____ Host Initials & Date _____
Home Initials & Date _____