

**AIR FORCE ROTC CROSS-REGISTRATION
WINSTON-SALEM STATE UNIVERSITY
AT NORTH CAROLINA A&T STATE UNIVERSITY**

INSTRUCTIONS

1. Fill out the attached form completely in order to cross-register for Air Force ROTC courses offered at North Carolina A&T State University. The form is available from the Winston-Salem State University Office of the Registrar.
2. It is the student's responsibility to obtain all necessary signatures and permissions. First, obtain signatures from the Registrar at Winston-Salem State University. Next, take the completed form to NC A&T Registrar's Office and obtain approval signature. Lastly, return the finished form to Winston-Salem State Registrar's Office. The Winston-Salem State University Registrar will make a photocopy of the completed form for your WSSU file.
3. It is the student's responsibility to adhere to the requirements, regulations, and deadlines of both institutions. Since the academic calendar of Winston-Salem State University differs from that of North Carolina A&T State University, a student wishing to drop a course with no penalty must meet the *earlier* of the two institutions' drop dates and must notify *both* registrars. It is the student's responsibility to remain informed of dates and requirements at both campuses.
4. Grades earned in AFROTC courses are transferred to Winston-Salem State University at face value.

Winston-Salem State University
Office of the Registrar
Cleon F. Thompson Jr. Student Service Center, Suite 202
601 S Martin Luther King Jr Dr.
Winston-Salem, NC 27110
(336) 750-3331

North Carolina A&T State University
Office of the Registrar
Dowdy Building
1601 East Market St
Greensboro, NC 27411
(336) 334-7595

United State Air Force ROTC
Detachment 605
122 Campbell Hall
1601 East Market St
Greensboro, NC 27411
(336) 334-7707

**AIR FORCE ROTC CROSS-REGISTRATION
WINSTON-SALEM STATE UNIVERSITY AT NORTH CAROLINA A&T STATE UNIVERSITY**

Term of Cross-Registration: _____
Date of Application: _____

| | | | |
|---|------------|--------|-------------------|
| Last Name | First Name | Middle | WSSU ID# |
| Local Address: Street | | | Phone |
| Local Address: City, State, ZIP | | | WSSU E-mail |
| Permanent Home Address: Street (if different) | | | Planned Grad Date |
| Permanent Home Address: City, State, ZIP (if different) | | | |

AFROTC COURSES YOU INTEND TO ENROLL IN AT NC A&T

| | | | | | | |
|---------------|---------|-----|-------|---------------|-----------------|-------------|
| Course Number | Section | CRN | Title | Meeting Times | NC A&T Cr. Hrs. | WSSU Credit |
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STUDENT MUST OBTAIN REQUIRED APPROVAL AND SIGNATURES PRIOR TO REGISTRATION

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| Student | Winston-Salem State University Registrar | North Carolina A&T State University Registrar |
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