## Tri-College Appeal Form

Submit completed form to your Home Campus:
- **Concordia College**: Registrar’s Office, Lorentzen 140, Fax 218-299-3224, registrar@cord.edu
- **Minnesota State University, Moorhead**: Registrar’s Office, Owens 104, Fax 218-477-2941, registrar@mnstate.edu
- **North Dakota State University**: Office of Registration & Records, Ceres Hall 110, Fax 701-231-8959, ndsu.registration.records@ndsu.edu
- **North Dakota State College of Science**: Admissions & Records, Haverty Hall 101, Fax 701-671-2648, NDSCS.StudentRecords@ndscs.edu
- **MState**: Registrar’s Office, MState Moorhead campus D123, Fax 218-299-6584, registration@minnesota.edu

Students are eligible to enroll in one Tri-College course per campus/per semester when that course is not offered on their home campus in a given term. Some automatic exceptions apply (see the [Tri-College University Website](#)). All other requests for exception to Tri-College registration guidelines must be submitted for consideration via this appeal form.

### My Home Campus:
- [ ] Concordia College
- [ ] Minnesota State University Moorhead
- [ ] North Dakota State University
- [ ] North Dakota State College of Science
- [ ] MState

### Section I:

<table>
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<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
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<thead>
<tr>
<th>Home Campus Student ID</th>
<th>Home Campus Email Address</th>
<th>Anticipated Graduation Semester (Fall/Spring/Summer and Year)</th>
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### Section II:

- I am seeking Tri-College enrollment at:  
  - [ ] Concordia College
  - [ ] Minnesota State University Moorhead
  - [ ] North Dakota State University
  - [ ] North Dakota State College of Science
  - [ ] MState

- Semester/Year:  
  - [ ] Fall
  - [ ] Spring
  - [ ] Summer
  - Year ______________

- Course Subject: __________  
  - Course number:__________  
  - Course Title:_________________________________________________________________________

- I am appealing the following:  
  - [ ] I would like to register for more than one course through Tri-College this semester.
  - [ ] I would like to register for a course through Tri-College that is offered by my home campus.

- Please give a detailed reason for this appeal:
  - ____________________________________________
  - ____________________________________________
  - ____________________________________________
  - ____________________________________________
  - ____________________________________________

### Section III:

- Student’s Signature: ___________________________ Date: ___________________________
- Advisor’s Signature: ___________________________ Date: ___________________________

### Office Use Only:

- Approved  [ ] Denied

- Registrar’s Signature: ___________________________ Date: ___________________________