

CONCURRENT ENROLLMENT

Name: _____ DOB: ___/___/___ Phone Number: (____) _____ - _____

SID: _____ Pima ID: _____ UA Email: _____@email.arizona.edu Sponsored: Y / N

A. To be completed by UA International Student:

I understand the following:

- Normal processing time is **5 business days** upon receipt of completed form.
- **To be eligible for concurrent enrollment, you must remain full-time at the UA for the entire semester (at least 12 units for undergrads).** Dropping below full-time at the UA without first obtaining approval from an ISS advisor may jeopardize your status, and will make you ineligible for concurrent enrollment in the future.
- **If this is your final semester you cannot take Pima classes that end beyond the last day of the semester at UA.**
- **If you have been approved for a Full-Time Enrollment Exemption in your final semester you are NOT eligible for Concurrent Enrollment.**
- International students cannot attend Pima classes offered at Davis-Monthan Air Force Base.
- **Enrollment in Chemistry, Biology, Physics, Reading, Writing and Math require an unofficial transcript to be submitted to Pima West Campus.**
- If this is your first time enrolling at Pima, submit the following to Pima West Campus: Passport, I-20, I-94, Pima Application Form and \$65 Pima admission fee.

I understand that I must be enrolled in at least 12 units at the University of Arizona every semester. I authorize Pima Community College to release my unofficial transcript to ISS. I understand that I still need to work with the UA Registrar's Office to transfer my Pima credits to my UA program. I also understand that information on this form will be released to Pima.

_____ Signature

_____ Date

B. To be completed by Academic Advisor:

I confirm that the course(s) listed below is a major or general education **required course** for student's degree requirements or that the course(s) is a **prerequisite** to the student's academic progress and that the student will take the equivalent course(s) at Pima Community College for the term indicated above.

Pima Course	Location (Campus)	Class Start and End Date (mm/dd/yyyy - mm/dd/yyyy)	Units	UA Course Equivalency

The student is expected to complete all degree requirements on (MM/DD/YY): _____

Comments: _____

_____ Academic Advisor (Print Name)

_____ Academic Advisor's Signature

_____ Date

_____ College/Department

_____ Email

_____ Phone number

C. International Student Services: Approved _____ Denied _____ Advisor Signature _____

Date Received: _____ By: _____	Date Prepped: _____ By: _____	Date Completed: _____ By: _____	Date Emailed: _____ By: _____
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