

## MICHIGAN INTERCOLLEGIATE GRADUATE STUDIES (MIGS) PROGRAM

Graduate students who are in good standing in a degree program are eligible to take graduate courses at several graduate schools in Michigan with prior approval of their **Home** and potential **Host Institutions**<sup>1</sup>. This program enables graduate students to take advantage of unique educational opportunities throughout the state. See the next page of this document for a list of participating institutions and MIGS liaison officers.

### ***PROCEDURE***

First, the student and her/his academic advisor identify course(s) at a participating university that are needed for the student's program of study and are unavailable at her/his Home Institution. Next the student obtains a MIGS application from the MIGS liaison officer at the Home Institution. When signatures of the student's academic advisor and MIGS liaison officer have been obtained, signifying that the student is qualified and eligible to take course(s) for transfer back to the program of study, the Home Institution MIGS liaison forwards the application to the Host Institution MIGS liaison for review and approval. The Host Institution MIGS liaison will ensure that the course(s) will be offered in the anticipated semester or term and that there is sufficient space available to allow for enrollment by a guest student. Once admission has been approved by the Host Institution, the MIGS liaison or Admission's Office at the Host Institution issues admissions documents and provides registration instructions to the student.

After completing the course(s), the student is responsible for arranging to have an official transcript sent from the Host Institution to the Home Institution. The student should also contact the MIGS liaison at the Home Institution to indicate that a transcript is being sent for posting on the academic record per guidelines of the Home Institution.

### ***ADDITIONAL INFORMATION***

**FEES AND FINANCIAL AID:** Students on MIGS enrollment pay tuition and other fees normally charged by the Host Institution for the services rendered. Students on MIGS enrollment are not eligible for financial aid from the Host Institution.

**RESIDENCY STATUS** is the same as at the Home Institution.

**CREDIT:** All credit earned under a MIGS enrollment will be accepted by a student's Home Institution as agreed and posted according to the transcripting practices of the Home Institution.

**GRADES** earned in MIGS courses may be applied toward the Home Institution grade point average or used for credit toward a graduate degree as allowed by the Home Institution's policy.

**PART-TIME:** A student may combine a part-time enrollment at the Home Institution with a part-time enrollment at the Host Institution with prior approval of the student's academic advisor (and SEVIS officer for international F-1 students). The Home Institution agrees to obtain the documentation necessary to combine the enrollments into a single enrollment status and to update the student's enrollment time status with the National Student Loan Clearinghouse or other time status reporting agency as appropriate.

**FELLOWSHIPS:** MIGS participation does not necessarily impact fellowship commitments made by the Home Institution for a given period. Financial aid issues should be negotiated by the student and appropriate officials prior to participating in MIGS.

**ENROLLMENTS** are limited to the minimum number of credits required for full-time graduate status at the Home Institution.

**TRANSCRIPTS:** The student is responsible for arranging to have one transcript certifying completion of course work sent from the Host Institution to the Home Institution.

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<sup>1</sup> (The **Home Institution** is where the student is currently enrolled in a graduate degree program; the **Host Institution** is where the student wishes to be a guest.)

## Michigan Intercollegiate Graduate Studies (MIGS) Program APPLICATION FORM

(Please Print or Type)

### STUDENT INFORMATION:

Name of Student (Last, first, middle) \_\_\_\_\_ Birth Date (mm/dd/yy) \_\_\_\_\_ Last 4 Digits of Social Security No. (required) \_\_\_\_\_

Student's mailing address at Home Institution (city, state, zip code) \_\_\_\_\_ Telephone No. \_\_\_\_\_ Student ID # @ Home Institution \_\_\_\_\_

Student's email address \_\_\_\_\_  Male  Female

U.S. Citizen  Non-U.S. Citizen \_\_\_\_\_  
Country of Citizenship and Birth (If different)

#### Residency status at Home Institution:

Michigan  
 Non-Michigan

Permanent U.S. Resident, Registration No. \_\_\_\_\_

#### Current Degree Sought:

Master's  
 Specialist  
 Doctorate

BA/BS: Institution \_\_\_\_\_ Degree \_\_\_\_\_ Date \_\_\_\_\_

### MIGS PROGRAM REQUEST:

From: \_\_\_\_\_  
Home Institution \_\_\_\_\_ Student's Field at **Home** Institution \_\_\_\_\_

#### Effective:

Fall  Spring  
 Winter  Summer  
 Spring/Summer \_\_\_\_\_(year)

To: \_\_\_\_\_  
Host Institution \_\_\_\_\_ Student's Field at **Host** Institution \_\_\_\_\_

Faculty Contact at **Host** Institution \_\_\_\_\_ Telephone No. \_\_\_\_\_

### Course(s) to be taken at Host Institution:

Title of Course	Dept/Course Number	Credits: <input type="checkbox"/> Quarter / <input type="checkbox"/> Semester

Have you previously participated in the MIGS Program?  No  Yes If yes, date: \_\_\_\_\_

Have you ever previously enrolled in the Host Institution?  No  Yes If yes, date: \_\_\_\_\_

I agree to observe all the rules and regulations of the Host Institution and the MIGS program,

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

### APPROVALS:

The above named student is in good standing and is approved by the Home Institution for enrollment at the Host Institution in the above course(s) for the semester or term beginning \_\_\_\_\_ 20\_\_\_\_ and ending \_\_\_\_\_ 20\_\_\_\_. The residency status as claimed above is correct.

#### Approval by the Home Institution:

Academic Advisor \_\_\_\_\_ Date \_\_\_\_\_

MIGS Liaison at Home Institution \_\_\_\_\_ Date \_\_\_\_\_

Registrar (where applicable)\* \_\_\_\_\_ Date \_\_\_\_\_

#### Approval by the Host Institution:

Faculty Contact or Department Chair at Host Institution \_\_\_\_\_ Date \_\_\_\_\_

MIGS Liaison Officer at the Host Institution \_\_\_\_\_ Date \_\_\_\_\_

\*The MIGS Liaison Officer at the Home Institution shall decide whether the signature of the Registrar is required.