

Michigan Intercollegiate Graduate Studies (MIGS) Program

Application Instructions

Graduate Students who are in good standing in a degree program are eligible to elect courses at several graduate schools in Michigan with the approval of both Host and Home faculty. This program for guest scholars enables graduate students to take advantage of unique educational opportunities throughout the state. Contact your graduate office for a list of participating Universities and MIGS liaison officers.

PROCEDURES:

1. The Student and Academic Advisor decide if the course(s) are appropriate to the program of study and are not available at the Home University.
2. The advisor discusses the plan with appropriate faculty members at the Host University.
3. The Host department is consulted to ensure that space is available for enrollment.
4. MIGS application is obtained from the Home Department, filled out, and returned to the MIGS office.
5. Signatures from the Academic Advisor, and Liaison Officer are obtained and the application is forwarded to the Host University for completion.
6. Once the admission has been approved by the Host Department, the MIGS Liaison Officer at the Host University issues admissions documents, registration instructions, and forwards a copy of the letter to the Home University.
7. After completing the course(s), the student is responsible for arranging to have two (2) official transcripts sent to the Records/Registrars Office at the Home University. The student should also contact that office to indicate that a transcript is being sent for posting on the academic record as MIGS graduate credit.

FEES: Students on a MIGS enrollment pay tuition and other fees normally charged by the Host University for the services rendered.

RESIDENCY STATUS: It is the same as at the Home University.

CREDIT: All credit earned under a MIGS enrollment will be accepted by a student's Home University as if offered by that University.

GRADES: Grades earned in MIGS courses will be applied toward the Home University grade point average.

PART-TIME: A student may combine a part-time enrollment at the Home University with a part-time MIGS enrollment with approval if the student's academic advisor.

FELLOWSHIPS: MIGS participation does not necessarily modify fellowship commitments made by a Home University for a given period. Therefore, specific arrangements for individual cases should be negotiated with the appropriate officials.

ENROLLMENTS: Enrollments are limited to six (6) credit hours for master's or specialist degree students or nine (9) credit hours for doctoral degree students.

TRANSCRIPTS: The student is responsible for arranging to have transcripts certifying completion of work under a MIGS enrollment forwarded to the Home University.

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APPLICATION FORM

Please Print or Type

Name of Student (Last name , First, Middle) _____ Birthdate (mm/dd/yy) _____ Social Security No. (required) _____

Student's mailing address at home institution (City, State, Zip Code) _____ Telephone Number _____ E-mail Address _____

Home Institution ID No. _____

[] U.S. Citizen [] Non-U.S. Citizen _____
 Country of Citizenship and Birth, if different
 [] Permanent U.S. Resident, Registration No. _____

Residency status at Home Institution:
 [] Michigan
 [] Non-Michigan

B.A./ B.S Source: Institution _____ Degree _____ Date _____

From: _____
 Home Institution _____ Student's Field at **Home** Institution _____

To: _____
 Host Institution _____ Student's Field at **Host** Institution _____

Faculty contact at Host Institution _____ Telephone No. _____

Course(s) to be elected at Host Institution:

Title of Course	Dept/Course Number	Credits:
		[] Quarter [] 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

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) or for other activity for the term beginning _____ 19____ and ending _____ 20____. The residency status as claimed above is correct.

Approval by the Home Institution:

Academic Adviser Date

Approval by the Host Institution:

Faculty Contact at Host Institution Date

MIGS Liaison Officer Date

Department Chairperson Date

*Registrar (where applicable)** Date

MIGS Liaison Officer Date

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