## Common Market Passport

- Participating University's:

  Metropolitan University
  - Minnesota State University, Mankato
  - Minnesota State University, Moorhead
- Southwest State University
- St. Cloud State University
- Winona State University

## **BEMIDJI STATE UNIVERSITY Records & Registration Office**

Deputy Hall, Room 101, #12 1500 Birchmont Dr. Bemidji, MN 56601 Phone: (218)755-2020 Fax: (218)755-4409

Date:

Section I: Student Information						
Name:		First		Previous		
Star ID:	Student E-mail:		(0	<i>D</i>	edu	
Phone:	Alternate E-	Mail:				
Current Address:	Street		City	State	Zip Code	
Home University:			Major:			
University you wish to atte	Term/Year:					
Reason you wish to partici	pate in the Commo	n Market Program: _				
	Section	n II: Course Reques	sts			
Course Title	Course ID	Section	Credits	Office	Office Only	
Ex. Gen. Chemistry I	203449	CHEM 1111	4.00			
Advisor's Signature:			Date:			
Common Market Director's Signature:			Date:			
	Section	n III: Office Use On	nly			
☐ We can meet your	request, please cont	act Records & Regis	tration when you	receive this.		
☐ We cannot meet yo	our request due to: _					

Common Market Director's Signature: