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. 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.

1 (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 [ ] Male [ ] Female

Student’s email address ________________________________

[ ] U.S. Citizen [ ] Non-U.S. Citizen
Country of Citizenship and Birth (If different) ________________________________
[ ] Permanent U.S. Resident, Registration No. ________________________________

BA/BS: Institution _____________________________ Degree _____________________________ Date

MIGS PROGRAM REQUEST:

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 taken at Host Institution:

<table>
<thead>
<tr>
<th>Title of Course</th>
<th>Dept/Course Number</th>
<th>Credits: [ ] Quarter / [ ] Semester</th>
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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.
ANDREWS UNIVERSITY
Alayne Thorpe - Dean of Graduate Studies & Research
4150 Administration Drive
Berrien Springs, MI 49104
(269) 471-3405 (Phone) / (269) 471-6246 (Fax)
alayne@andrews.edu

AQUINAS COLLEGE
Heather Kesselring-Quakenbush - Associate Provost & Dean of Curriculum
1700 Fulton St. E
Grand Rapids, MI 49506
(616) 632-2898 (Phone) / (616) 732-4432 (Fax)
hak001@aquinas.edu

CALVIN COLLEGE
Cindi Hoekstra – Manager, Graduate Program
3201 Burton Street SE
Grand Rapids, MI 49546
(616) 526-6158 (Phone) / (616) 526-6505 (Fax)
choekstr@calvin.edu

CENTRAL MICHIGAN UNIVERSITY
David Ash – Vice President for Research and Dean of Graduate Studies
251 Foust Hall
Mt. Pleasant, MI 48859
(989) 774-4723 (Phone)/(989) 774-1859 (Fax)
ash1de@cmich.edu

EASTERN MICHIGAN UNIVERSITY
Phyllis Britton – Administrative Secretary
Graduate School/Research Development
200 Boone Hall
Ypsilanti, MI 48197
(734) 487-4872 (Phone)
pbritto1@emich.edu

FERRIS STATE UNIVERSITY
Jessica Lyons - Graduate Admin. Assistant
1301 South State Street, IRC 119
Big Rapids, MI 49307
(231) 591-2650 (Phone) / (231) 591-2673 (Fax)
gradoffice@ferris.edu

GRAND VALLEY STATE UNIVERSITY
Jennifer Palm, Assistant to the Graduate School
401 W Fulton Street 318C DEV
Grand Rapids, MI 49504
616-331-6858 (Phone) / 616-331-7317 (fax)
palmj@gvsu.edu

MADONNA UNIVERSITY
Deborah Dunn – Dean of the Graduate School
36600 Schoolcraft Road
Livonia, MI 48150
(734) 432-5457 (Phone) / (734) 432-5862 (Fax)
dunn@madonna.edu

MICHIGAN STATE UNIVERSITY
Kristan Maybee- Assistant to the Graduate School Dean
Chittenden Hall
466 W. Circle Drive, Room 214B
East Lansing, MI 48824
(517) 353-2430 (Phone)
amaaskris@msu.edu

MICHIGAN TECHNOLOGICAL UNIVERSITY
Nancy Byers-Sprague - Director of Graduate Degree Services
1400 Townsend Drive
Houghton, MI 49931
(906) 487-2755 (Phone) / (906) 487-2284 (Fax)
nspr@mtu.edu

NORTHERN MICHIGAN UNIVERSITY
Lisa Eckert – Dean of the Graduate Studies and Research Office
401 Cohodas Hall
1401 Presque Isle Avenue
Marquette, MI 49855
(906) 227-2300 (Phone) / (906) 227-2315 (Fax)
grada@nmu.edu
OAKLAND UNIVERSITY
Claire Rammel – Assistant Dean
Graduate Study and Lifelong Learning
586 Pioneer Drive
Rochester, MI 48309
(248) 370-3159 (Phone) / (248) 370-3226 (Fax)
rammel@oakland.edu

SACRED HEART MAJOR SEMINARY
David J. Twellman – Assistant Dean and Registrar
2701 Chicago Blvd.
Detroit, MI 48206
(313) 883-8512 (Phone) / (313) 883-8682 (Fax)
twellman.david@shms.edu

SAGINAW VALLEY STATE UNIVERSITY
Jenna Briggs – Senior Director, Office of Advanced Studies and International Students Services
7400 Bay Road
University Center, MI 48170
(989) 964-2180 (Phone) / (989) 964-6066 (Fax)
jbbriggs@svsu.edu

SIENA HEIGHTS UNIVERSITY
Cheri Betz – Dean of the Graduate College
1247 E. Siena Heights Drive
Adrian, MI 49221
(517) 264-7234 (Phone) / (517) 264-7714 (Fax)
cbetz@sienaheights.edu

UNIVERSITY OF DETROIT MERCY
Diane Praet – Assoc. VP & Registrar
4001 W. McNichols Road
Detroit, MI 48221-3038
(313) 993-3313 (Phone) / (313) 993-3317 (Fax)
praetdm@udmercy.edu

UNIVERSITY OF MICHIGAN - ANN ARBOR
Lee Eriksson – Assistant Director of Admissions Suite
0120, 915 E. Washington Street
Ann Arbor, MI 48109-1070
(734) 647-4543 (Phone) / (734) 647-7740 (Fax)
lerikss@umich.edu

UNIVERSITY OF MICHIGAN – DEARBORN
Soraya Jeffries Patton – Associate Registrar 4901
Evergreen Road, Room 1169 Univ. Center Dearborn, MI 48128
(313) 593-4753 (Phone) / (313) 593-5697 (Fax)
sjeffrie@umich.edu

UNIVERSITY OF MICHIGAN – FLINT
Matt Bohlen – Associate Director of Graduate Programs
303 E. Kearsley Street
251 Thompson Library
Flint, MI 48502
(810)762-3171 (Phone) / (810) 766-6789 (Fax)
mbohlen@umich.edu

WAYNE STATE UNIVERSITY
Sherry Quinn – Director of Graduate Admissions
5057 Woodward Avenue
Detroit, MI 48202
(313) 577-8141 (Phone)
squinn@wayne.edu

WESTERN MICHIGAN UNIVERSITY
Jennifer Holm – Dissertation Specialist
Kalamazoo, MI 49008
(269) 387-8271 (Phone) / (269) 387-8232 (Fax)
jennifer.holm@wmich.edu