

**New York City Consortium on Latin American Studies (NYCCLAS) Registration Form**  
Columbia University / New York University

**To MA Students ONLY:**

1. Select a course(s) from the pre-approved list of six Latin American courses being offered at NYU.
2. Contact Eliza Kwon-Ahn at ILAS with any questions on Columbia administrative matters there FIRST.
3. If necessary, contact the CLACS Office at NYU for instructions on completing administrative matters there. NYU Contact information can be found at the bottom of this form.
4. Submit the complete form to Eliza Kwon-Ahn to complete the manual registration

**PERSONAL INFORMATION**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
Student UNI \_\_\_\_\_ Term Started in Program: Fall / Spring (please circle) 20 \_\_\_\_ \_\_\_\_  
Date of Birth \_\_\_\_\_ Term for NYCCLAS Course Enrollment: Fall / Spring (please circle) 20 \_\_\_\_ \_\_  
Address \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Phone # \_\_\_\_\_

**COLUMBIA INFORMATION**

Are you in good academic standing? YES or NO  
(please circle)  
Department or Division: \_\_\_\_\_ Degree (consortium is for MA graduate students only):  M.A.  
Columbia ILAS Representative Approval (Signature) \_\_\_\_\_ Date: \_\_\_\_\_

**NYU INFORMATION**

Department and Division: \_\_\_\_\_  
Course #/Section # \_\_\_\_\_ Course Title: \_\_\_\_\_ Course Credits: \_\_\_\_\_  
Instructor (Signature) \_\_\_\_\_ Please Print Name \_\_\_\_\_  
NYCCLAS Coordinator (Signature) \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE SIGN BELOW AND SUBMIT THIS COPY TO THE OFFICE OF THE REGISTRAR (205 KENT HALL). PLEASE FOLLOW YOUR COLUMBIA GUIDELINES REGARDING WITHDRAWING AND/OR DROPPING THE COURSE.**

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

## CONTACT INFORMATION

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NYU/CLACS  
King Juan Carlos I of Spain Center (KJCC)  
53 Washington Square South, Floor 4W  
Dylon Robbins, Director  
Phone: (212) 998-8683  
E-mail: [dlr329@nyu.edu](mailto:dlr329@nyu.edu)

NYCCLAS