



APPROVAL FORM FOR AN UNDERGRADUATE TO TAKE A GRADUATE LEVEL COURSE

Students who wish to take graduate course must submit this form for review to the Office of Graduate Education, 1516 Peoples Ave., during the registration period but no later than the second week of classes to request approval to register. The undergraduate academic advisor, the course instructor(s) and the graduate program director must sign the completed form before submission to the Office of Graduate Education. The Office of Graduate Education makes the final decision based on the student's overall academic performance and subject-specific suitability.

Name: \_\_\_\_\_ RIN: \_\_\_\_\_

E-mail: \_\_\_\_\_ Term of Enrollment in the Course: \_\_\_\_\_

Class: \_\_\_\_\_ Student's Major Department: \_\_\_\_\_ Overall GPA: \_\_\_\_\_

1. Graduate Course Number: \_\_\_\_\_ CRN: \_\_\_\_\_

Course Title \_\_\_\_\_

2. Graduate Course Number: \_\_\_\_\_ CRN: \_\_\_\_\_

Course Title \_\_\_\_\_

\*If the 6000 level course(s) is cross-listed with the 4000 level, a syllabus must be attached\*

TOTAL NUMBER OF CREDITS (including graduate coursework, if approved): \_\_\_\_\_

Qualifications to take a graduate level course(s): \_\_\_\_\_

\_\_\_\_\_

Undergraduate Academic Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Advisor's name: \_\_\_\_\_

Note to Instructors: Your signature below verifies that the student has the appropriate background/pre-requisites to meet the course requirements.

Course #1 Instructor's Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Course #1 Instructor's name: \_\_\_\_\_

Course #2 Instructor's Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Course #2 Instructor's name: \_\_\_\_\_

Graduate Program Director Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office of Graduate Education Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_