



Undergraduate Student Request (SR)

Last Name _____ First Name _____

Student ID _____ Cell Phone # _____

Current Degree BA BS BFA Certificate Catalog Year _____

Current Major(s) _____ Option(s) _____

Current Minor(s) _____ Certificate(s) _____

Are you requesting to enroll in a graduate course? Yes (*limit of 6 credits*) No

Students requesting to enroll in a graduate course must be a senior with a cumulative 3.0 GPA. Graduate level credits will count toward the completion of the undergraduate degree, as well as toward the graduate degree. Please note, for Financial Aid, graduate credits cannot be in excess of degree requirements. If graduate credits are in excess, you may incur additional financial responsibility.

REQUEST – Provide a brief statement defining WHAT is being requested:

If SR pertains to a particular course, provide relevant information. (If transfer credit is involved, note institution after course title.)

Course Number Course Title/Institution # Credits Instructor

Term when course was or will be taken: Fall Early Spring Spring Summer Year _____

Course Number Course Title/Institution # Credits Instructor

Term when course was or will be taken: Fall Early Spring Spring Summer Year _____

RATIONALE – Provide supporting statement explaining WHY request is necessary: (Attach additional sheets as needed.)

Student Signature _____ Date _____

Attention – For authentication purposes, student must obtain physical signatures.

Advisor Signature Print Last Name Date

Required for undergraduate students seeking to enroll in graduate courses.

Instructor Signature Print Last Name Date

Chair/Designee Signature Print Last Name Date

Endorsed: Yes No

Please return this form to the registrar's office in Speare via the methods noted below.

Processed by: _____ Date _____ 7/2020