

Form for Current Semester Undergraduate Registration in a Graduate Course

This form is intended for use in initiating the following:

1. The department force-registering the student in the course;
2. Academic Processing Services converting the credit type from graduate to undergraduate.

Note: This form is for the *current semester only*. If you want to retroactively convert graduate to undergraduate credit, use a Form for Student Withdrawal from a Combined Degree Program and/or Retroactive Conversion of Graduate to Undergraduate Credit.

An undergraduate student who wishes to take a graduate course must meet the following criteria:

1. Junior or Senior status and acceptance into a major program;
2. Overall grade point average of 3.0, including transfer credits;
3. Written permission of the instructor of the course explaining the academic rationale for this exceptional registration;
4. Any additional requirements from the academic department;
5. Registration in at least 12 undergraduate credits in addition to the graduate credit during this semester in order to sustain TAP and other financial support; and
6. No Incomplete grades are pending on this student's record (recommended).

This form must be completed prior to the last day of the drop/add period.

Student Name: _____ Person # _____

Major _____ Cum. GPA: _____ Jr/Sr Status: Yes / No

Semester _____ Number of undergraduate credits for the semester _____

Registration Number: _____ Course Number (ex. CIE 501): _____

Instructor: _____

Registration for: _____ Graduate credit (Note that undergraduates may receive graduate credit for a maximum of two graduate level courses (not to exceed a total of 8 credit hours) during their undergraduate career unless additional graduate credits are required for the degree.)

_____ Undergraduate credit (This form must be submitted to Academic Processing Services – see below**.)

Instructor's recommendation and explanation of academic rationale: _____

Instructor Signature _____ Date _____

Student Signature _____ Date _____

Academic Advisor's Signature _____ Date _____

Department Chair _____ Date _____

Department Official who processed this force-registration:

Name: _____ Signature _____ Date _____

Note: For future potential audit purposes, a copy of this form must be kept on file where student academic records for the department are kept.

****If a student wishes undergraduate credit for a graduate course, this form should be submitted to Academic Processing Services (APS) at 232 Capen or via fax at 645-7762. Note that the change in credit will not show on the student's record until grades are posted for the semester.**