

## Permission for Graduate Course for Graduate Credit Form

Use this form to request permission to take a graduate course outside of your program for graduate credit toward your graduate degree. No credit toward a graduate degree is allowed for a course numbered below 500.

- For all courses: Obtain the approval of the course instructor and your Director of Graduate Studies.
- For courses in the School of Education or School of Marine Science: Also obtain the approval of the school's Associate Dean of Academics.
- For courses in the School of Law, also obtain the approval of the school's registrar; for courses in the school of Business, also obtain the approval of the program director.

### Instructions

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Signatures required before returning the form:

- Student;
- Course instructor;
- Director of Graduate Studies or Chair/Program Director in student's graduate program;
- Additional signatures as needed and indicated on the form.

Deadline: Before the end of the Add/Drop Period.



## Permission for Graduate Course for Graduate Credit

Student's Name: \_\_\_\_\_ Banner ID #: \_\_\_\_\_

Dept./Program: \_\_\_\_\_ Degree: ☐ M.S. ☐ Ph.D.

*I request permission to take the course listed below and count the credit(s) earned toward satisfying my graduate degree requirements.*

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

Course CRN# \_\_\_\_\_ Dept./Prog. \_\_\_\_\_ No. \_\_\_\_\_ Section: \_\_\_\_\_ Credits: \_\_\_\_\_

Course to be taken in: Year \_\_\_\_\_ Semester ☐ Fall ☐ Spring ☐ Summer

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

\_\_\_\_\_  
Course Instructor: Print Name | Signature Date

### To be filled out by the Department/Program:

For students on the M.S./Ph.D track, toward which degree will this course be counted?

☐ M.S. or ☐ Ph.D.

*I judge this course appropriate for the student's graduate studies and support the student's request.*

\_\_\_\_\_  
Director of Graduate Studies or Chair/Program Director: Print Name | Signature Date

\_\_\_\_\_  
(if needed) Vice/Assoc. Dean of A&S, Education, or VIMS: Print Name | Signature Date

\_\_\_\_\_  
(if needed) Registrar, School of Law or Program Director, School of Business: Print Name | Signature Date

\_\_\_\_\_  
Assistant Dean for Graduate Studies Signature Date

Processed \_\_\_\_\_