



Request Permission to Take Undergraduate Courses for Graduate Credit

I request permission to take the following undergraduate course for graduate credit for the reasons given:

Course Number	Course Title	Credit Hours	Semester
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Reasons:

Name _____ Fredonia ID # _____

Signature _____ Date _____

Address _____

Departmental Recommendation

The Department of _____ recommends approval
for the following reasons: disapproval

Chairperson's signature _____ Date _____

Advisor's signature _____ Date _____

Approval

Disapproved

Associate Vice President for Graduate Studies Date _____