



# Permission to Take Graduate or Undergraduate Course

## INSTRUCTIONS

- Complete form and obtain the following signatures:
  - Academic Advisor
  - Department Chair (required for undergraduate students only)
  - Assistant Director, Graduate Services
- Take the signed form to the Office of the Registrar for course registration

Student Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

SCU I.D. #: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

Academic Quarter: \_\_\_\_\_ Year Course(s) shall be taken in: \_\_\_\_\_

Subject: \_\_\_\_\_ Catalog #: \_\_\_\_\_

Course Title: \_\_\_\_\_ Section Number: \_\_\_\_\_

Subject: \_\_\_\_\_ Catalog #: \_\_\_\_\_

Course Title: \_\_\_\_\_ Section Number: \_\_\_\_\_

### Please check the appropriate level:

Undergraduate Student

Graduate Student

### Undergraduate Students Only - List graduate courses in progress or already completed:

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_

### Required Signatures:

Advisor's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Department Chair Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required for undergraduate students only)

Graduate Services: \_\_\_\_\_ Date: \_\_\_\_\_

Permission Number (if a course is full): \_\_\_\_\_

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date