



**WILLIAM
PATERSON**
UNIVERSITY

UNDERGRADUATE APPLICATION TO TAKE GRADUATE COURSE

NAME: _____ MAJOR: _____

SID#: _____ ADVISOR: _____

ADDRESS: _____ CHECK STATUS: ☐ SENIOR
_____ ☐ JUNIOR

I REQUEST PERMISSION TO TAKE THE FOLLOWING GRADUATE LEVEL COURSE

DURING THE _____ SEMESTER _____ YEAR.

REFERENCE

NUMBER	COURSE TITLE	CREDITS	INSTRUCTOR
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_____	_____	_____	_____
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TOTAL CUMULATIVE GPA: _____ VERIFIED BY: _____

DEAN

CUMULATIVE GPA IN MAJOR: _____ VERIFIED BY: _____

DEAN

WHAT WILL BE THE TOTAL CREDIT LOAD

YOU WILL CARRY THIS SEMESTER: _____ VERIFIED BY: _____

DEAN

STUDENT'S SIGNATURE: _____ DATE: _____

APPROVED BY: _____ DATE: _____

CHAIRPERSON

APPROVED BY: _____ DATE: _____

DEAN

CC: REGISTRAR
ACADEMIC DEAN
CHAIRPERSON
STUDENT

OFFICE OF THE REGISTRAR
REVISED 7/79